

**Breckland Business Innovation Den  
Application Form**

*Please ensure you have read and understood the criteria for this funding before beginning an application*

1. **Personal details**

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| --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | |
| **Correspondence address** |  | | | | |
| **Daytime telephone no.** |  | | | | |
| **Email** |  | | | | |
| **Date of birth** |  | | | | |
| **Full names of any other people directly involved in this proposal** (eg. Business partners, investors etc.) |  | | | | |
| **Tell us about the background, skills and experience of the people involved** (where relevant to this proposal). You may attach CVs if needed. | | | | | |
| **Are any of the people involved already a director of any other business?** If so, please provide details, including the company registration number. | | | | | |
| **Have any of the people involved ever been declared bankrupt or disqualified from being a director?** If so, please provide details. | | | | | |
| **Do any of the people involved have any unspent  convictions?** *Please tick* **Yes** | | |  | **No** |  |
| *All short-listed applicants will be asked to declare any previous convictions, which are ‘unspent’. All information will be treated in confidence and will not necessarily prejudice the application.* | | | | | |
| **Do any of the people involved have any business or personal links to officers or councillors of Breckland Council?** If so, please provide details. | | | | | |
| 1. **Business details** |  | | | | |
| **Registered business name** |  | | | | |
| **Registered business address** |  | | | | |
| **Legal status** | *Tick and enter registered number if applicable* | | | | |
| Company |  |  | | | |
| Social enterprise/ CIC |  |  | | | |
| Other – please state |  |  | | | |
| **Current status of the business** | *Please tick* | | | | |
| Early stage/start up |  |  | | | |
| Already trading (looking to expand diversify) |  |  | | | |
| **Date established** |  | | | | |
| **Number of employees** – please state and indicate FT/ PT |  | | | | |
| **Current base/ area(s) of operation** |  | | | | |
| **Have you already received advice, support or external funding from any other source for this business development?** If so, please describe | | | | | |
|  |  | | | | |
| 1. **Your business development idea** |  | | | | |
| **Describe your idea in 20 words or less** |  | | | | |
| **Describe your idea in detail** *(250 words)* | | | | | |
| **Explain at what stage you are in developing your idea** | | | | | |
| **What is unique about your business idea** – what is likely to set it apart from other businesses? | | | | | |
| **What evidence is there that people are likely to want the product/service you are proposing?**  Tell us if there has been any market research/testing of concept  Who will buy the product/service? | | | | | |
| **How will you market or promote your idea?** | | | | | |
| **What other organisations are providing competing products/services locally?** | | | | | |
| **How will your business idea create opportunities for local people?** Will you create jobs, or offer training, apprenticeships or other placements? | | | | | |
| **Where in Breckland will the funded activity be based?** |  | | | | |
| 1. **The finance/ support requested** | | | | | |
| **How much funding are you seeking?** *(a maximum of £20,000 over one year is available)* | £ | | | | |
| **If the amount requested will not fully fund your plans, tell us how much you will need to raise additionally** – and the use the space below to tell us your plans to raise it, and how much is currently secured: | £ | | | | |
|  | | | | | |
| **What will the funding be spent on?** *Summarise here and attach full budget* | | | | | |
| **Breckland Council may be able to offer access to business premises with subsidised rent or rates.** Would this be of interest to you? What facilities, space and location (e.g. town centre/industrial unit) would you need? | | | | | |
| **What other specialist advice might you need to develop your idea, e.g. legal, financial etc.?** | | | | | |
| **How much do you aim to turnover in the funded year of operation (April 2019-March 2020?** | £ | | | | |
| **Where do you see your business being in 5 years’ time?** *Please attach a copy of your business plan* | | | | | |

1. **Declaration**

Please enter your name and complete the details below to confirm that:

*• You are authorised to submit this application on behalf of the named business*

*• The details submitted are correct to the best of your knowledge – if your application is shortlisted you will be asked to provide evidence of the information given*

* *You understand that lobbying of panel members, and other persons involved with delivering the fund, will result in disqualification. The panel’s decision will be final.   
  g*
* *By entering your name below you agree to allow Norfolk Community Foundation to retain the personal and organisational data you provide in your application on our database. This information will be used to help review and assess your application in association with the fundholder and/ or their appointed representatives, to administer and monitor any grant awarded, and as part of any publicity or other grant related activity undertaken by Norfolk Community Foundation, the fundholder or their representatives. Read our full Privacy Notice at* [*https://www.norfolkfoundation.com/privacy-policy/*](https://www.norfolkfoundation.com/privacy-policy/)

|  |  |  |  |
| --- | --- | --- | --- |
| **Print name** |  | | |
| **Role in organisation** |  | **Date** |  |

Your application should include:

* A copy of your business plan.
* A copy of your most recent accounts (where relevant).
* A copy of the budget for the year April 2019-March 2020.
* Income forecasts for this period.
* Evidence that the relevant insurance is in place for your activities.

You may submit other relevant information that you feel supports your application.

**Please send your completed application to Norfolk Community Foundation by email to** [**grants@norfolkfoundation.com**](mailto:grants@norfolkfoundation.com) **by Monday 4 February 2019.**

Next steps:

* The information you provide will be verified, and you may be contacted if more details are required.
* All proposals will be reviewed by the appointed panel, and shortlisted applicants will be invited to take part in the pitching event.
* Final funding decisions will be made based on presentations at the event.
* Unsuccessful applicants will be advised where possible on how to develop their plans.

**If you have any questions about this process, please contact Norfolk Community Foundation on 01603 623958 or email** [**grants@norfolkfoundation.com**](mailto:grants@norfolkfoundation.com)

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|  | **Norfolk Community Foundation St James Mill, Whitefriars, Norwich NR3 1TN**  [**www.norfolkfoundation.com**](http://www.norfolkfoundation.com)  Registered charity no: 1110817 Registered company no: 05234236 |