

WELSH GOVERNMENT RURAL COMMUNITIES – RURAL DEVELOPMENT PROGRAMME 2014-2020

APPLICATION FORM – PART ONE

APPLICANT DETAILS



INTRODUCTION

All applications to the Rural Programmes 2014-2020 programme must be submitted electronically through the Welsh Government WEFO Online portal.

In order to submit your application you must be registered with WEFO Online. See separate instructions on how to complete your registration.

To submit your full application you must complete this Application Form Part One – Applicant Details and also Application Form Part Two – Project Plan. You must submit both parts through WEFO Online along with any necessary financial or other supporting documents.

We will not be able to confirm that you are an eligible applicant until the Application Form Part One – Applicant Details has been returned and we have completed the initial eligibility checks.

If you would like confirmation that you are an eligible applicant before completing and/or submitting Application Form Part Two – Project Plan you may submit Application Form Part One – Application Details first. This must be submitted through WEFO Online.

Note - your project will not be appraised and a funding decision made until you have submitted both parts.

You may submit your application in Welsh. Any application submitted in Welsh will be treated no less favourably than an application submitted in English.

The language preference you select here is for your organisation. Formal correspondence and guidance will be in the language preference you select. Technical and financial information will normally be issued in English. Regardless of preference selected here, written or verbal correspondence from you may be in either language and we will aim to reply in the same.

Welsh

English

Bilingual

Please complete this form electronically and submit via WEFO Online by no later than the deadline in your invitation letter.

1. APPLICANT DETAILS

a. Name and Full Postal Address

Scott Blytt Jordens Cheriton Woods Ltd [information redacted]

Project Contact Name:

Position:

e-mail:

Telephone No.

b. Business or Organisation Status

Please tick appropriate box:

- | | | | |
|--|-------------------------------------|--|--------------------------|
| • Sole Trader | <input type="checkbox"/> | • Partnership | <input type="checkbox"/> |
| • Private limited company | <input checked="" type="checkbox"/> | • Public limited company | <input type="checkbox"/> |
| • Public sector organisation | <input type="checkbox"/> | • Co-operative, Industrial and Provident Society or Mutual | <input type="checkbox"/> |
| • Charity / Third Sector | <input type="checkbox"/> | • Town/Community Council | <input type="checkbox"/> |
| • Private Company Limited by Guarantee | <input type="checkbox"/> | • Local Community Groups | <input type="checkbox"/> |
| • Local Authorities | <input type="checkbox"/> | • the Welsh Government | <input type="checkbox"/> |
| • Community Interest Companies | <input type="checkbox"/> | • Community Amateur Sports Clubs | <input type="checkbox"/> |
| • University | <input type="checkbox"/> | • Other | <input type="checkbox"/> |

If other, please specify

If the business is an incorporated legal entity please supply a copy of the Memorandum & Articles.

c. Trading under another name

Does the business trade under another name?

Yes No

If 'Yes', please list all other names.

d. Business or Organisation Reference Numbers

Please complete all of the following that apply:

Welsh Government Customer Reference Number (CRN)

[information redacted]

You must enter a CRN if you have one. If you do not have a CRN please contact Scheme Management Unit.

Company Number

10668595

VAT Number

273104529

Charity Number

Farm Holding Number (CPH Number)

59/050/0134

Mutuals Public Registration Number

e. Business or Organisation Ownership and Directors

Is the applicant a partnership business?

Yes No

If 'Yes', please give the full names of all of the partners of the applicant business

Is the applicant a member of a group of companies?

Yes No

If 'Yes', please give the name of the immediate parent company, and if different, the ultimate parent company, and the country or countries in which they are registered

Please give details of all of the shareholders of the applicant company (including the Company Number(s) if registered in the UK)

Is the applicant a business or organisation that has directors or trustees?

Yes No

If 'Yes', please give details of all of the directors or trustees

Scott Blytt Jordens - Director

Is the applicant business or organisation a wholly owned subsidiary?

Yes No

If 'Yes', please give the name of the immediate, and if different, the ultimate parent company or organisation and the country in which they are registered

f. Size of Business or Organisation

Please tick the appropriate box:

Micro-enterprise (up to 9 employees)

SME enterprise (10 to 250 employees)

Large enterprise (more than 250 employees)

Please give the following details:

No of Employees (Full Time Equivalents)	1
Annual Gross Turnover (for last Financial year)	N.A. – new enterprise
Balance Sheet Net Assets (for last financial year)	N.A. – new enterprise

2. DECLARATION BY APPLICANT

- I declare that the information contained in this form is true to the best of my knowledge and belief.
- I undertake to notify Welsh Government of any changes to the details given above.

Name (block capitals)	Scott Blytt Jordens
Date	09/06/2018
Position	Director

Electronic Signature

By submitting this form through WEFO Online you are making the declaration above.

WARNING – Any person who knowingly or recklessly makes false or misleading statements for the purposes of obtaining grant under the Rural Programmes or assisting another to obtain grant may be prosecuted.