



To be forwarded to:- Grants Unit
3 North Ness
LERWICK
ZE1 OLZ

CAPITAL GRANT TO VOLUNTARY ORGANISATIONS

Application for * INTERIM payment
FINAL payment

1. Name and address of Organisation _____

2. Description and location of Scheme _____

3. Date of expiry of maintenance period

4. The following receipts and/or accounts are enclosed in respect of the expenditure on which grant is now claimed:

(a)	(b)	(c)	(d)
Name of Firm	Amount Vouched	Retention Sum (if applicable)	(Columns (b) less (c))
	£	£	£
		CLAIM TOTAL	

5. Project expenditure previously submitted £ _____
- (Add) Project Expenditure in respect of this claim form £ _____
- TOTAL EXPENDITURE SUBMITTED TO DATE** £ _____
6. Cumulative contract retention:
Total against which grant is yet to be claimed £ _____

N.B. Original receipts and payment certificates (where appropriate) must be supplied along with this completed claim form

TO BE COMPLETED ONLY BY ARCHITECT, SURVEYOR OR OTHER TECHNICAL OFFICER OF ORGANISATION

I HEREBY CERTIFY that the works to which the foregoing claim refers * are being carried out/have been completed in accordance with the conditions of grant approved by the Shetland Islands Council and that the cost is as stated.

Signed: _____

Date: _____

Qualification: _____

CERTIFICATE OF APPLICANT ON BEHALF OF ORGANISATION

I HEREBY CERTIFY that to the best of my knowledge and belief the statements in the foregoing account and in the certificate above are correct and that the conditions subject to which grant has been approved * are being/have been observed.

I hereby make application on behalf of: _____
for payment of grant due

Bank to which remittance should be made: _____

Address: _____

Account No: _____ *Sort Code:* _____

Signed: _____ *Designation:* _____

Date: _____

For official use only

This is to certify that I have today approved payment of grant to this Organisation as an instalment of the grant offered by this Authority and have examined vouchers/receipts* in support of this claim as undernoted.

GRANT CALCULATION

Vouchers/Receipts - This Claim £ _____ Previous Claims £ _____

_____ % of vouched expenditure to date (£ _____)	£ _____
Less instalments already paid	- £ _____
Grant instalment now due	£ _____
	=====

Signed _____ Date _____

* Delete as appropriate
SICECS1