FUNDING APPLICATION FORM

1st April 2024 – 31st March 2025

About You

Business Name			
Contact Name		Position	
Address			
Tel. No			
Email			

1. Which locations will your project support. ***Be specific in the box on the right?***

☐ Dolphin Centre	☐ Kingland		
☐ Falkland Square	☐ High Street		
☐ Old Town	☐ Quay		
☐ Bus Station / Lighthouse Poole			

2. Which funding category does your project relate to?

☐ Events

☐ Product Development

☐ Visitor Experience

☐ Other

3. Please outline what you intend to deliver with the funding, if provided

4. Please tell us who will benefit from the project:

- ☐ Families
- ☐ Residents
- ☐ Couples
- ☐ UK Visitors
- ☐ Individuals
- ☐ International Visitors
- ☐ Businesses
- ☐ Other

5. Will your project solve a problem in a designated area?

- ☐ Yes
- ☐ No

If yes, please explain the specific problem and provide relevant evidence (i.e. complaints/research)

6. Will your project create new opportunities in the designated area?

- ☐ Yes
- ☐ No

If yes, please explain the opportunity available

PLEASE ANSWER THE BELOW IF THE FUNDING RELATES TO AN EVENT

7. What is the expected number of participants, spectators or visitors to your event?

8. Please provide evidence of business support for the event

9. Have you registered your event with BCP Council?

☐ Yes ☐ No

If yes, please expand

10. Do you intend for the event to become an annual, self-sustaining event?

☐ Yes ☐ No

If yes, please expand

11. What is the total cost of the project?

£	

12. How much are you requesting from Poole BID towards your project?

£

13. Is the project an extension to existing services/project already being provided?

☐ Yes ☐ No

If yes, please provide a breakdown of who and how the service is currently being funded

☐ BCP Council £

☐ Businesses £

☐ Grants £

☐ Other £

14. If the funding is for a new project, please provide a breakdown of all other financial contributors

☐ BCP Council £

☐ Businesses £

☐ Grants £

☐ Other £

15. Please provide project dates including details of times of year that this should/could not take place

☐ Length of project planning	
☐ Est. Start Date	
☐ Length of project delivery	

16. Who will be delivering the project?

☐ Existing Staff	
☐ Recruited Staff	
☐ Contractor/Supplier	

17. Have local businesses been given the opportunity to send quotes to be the contractor/supplier?

☐ Yes ☐ No

If no, please provide a reason for this.

18. What KPIs will be used to measure the success of the project?

19. How will the project benefit the BID Levy Paying businesses?

If you are able to provide any additional benefits for the BID Levy Paying businesses, please provide further information below

All supporting documents / evidence should be submitted with your Application Form including detailed cashflow/marketing plans if applicable

Official Use Only

Acknowledged ☐ Yes ☐ No Date Received:

Outcome Sign off by BID Lead ☐ Yes ☐ No

Board Meeting Approval (if applicable)