



COMMUNITY ASSET TRANSFER

Stage 2 Business Model Application Form

SECTION A

About You and Your Organisation

1. Please provide the details of the organisation making the application

Name of organisation	
Address of organisation including postcode	
Telephone Number	
Fax Number	
E-Mail Address	

2. Please provide details of the contact person in relation to this application who will be the point of contact for all correspondence about this project.

Full Name	
Position in Organisation	
Contact Address (if different from above)	
Telephone Number	
Fax Number	
E-Mail Address	

3. Please describe the legal status of the organisation

What type of organisation are you?	
If you are a partnership please provide details of all the partners involved	
Does the organisation have a written Constitution (Yes/No)?	
When was the organisation established?	
Does the organisation produce an annual report on its activities (Yes/No)	

4. Please give details of the organisation's structure

Please identify current Board / Management Committee / Trustees / Directors and Chair	
How often does the governing body meet?	
Please identify how many people are: Full-Time Staff Part-Time Staff Volunteers	

5. Please give details of the organisations main purpose and current activities

<p>Briefly describe your organisations main aims and objectives</p>	
<p>What are the current services provided by the organisation?</p>	
<p>Does the organisation have previous experience of managing an asset?</p> <p>If yes, please provide details</p>	
<p>Please provide details of the current financial position of the organisation including copies of accounts for the past three years where they are available</p>	

SECTION B

Your Model

6. Please provide details of the asset (building or land) you are interested in (name, address etc) and the overall purpose for which you will use the building
7. Will any modifications need to be made to the asset to make it suitable for your purposes? If yes, please describe these modifications
8. Please describe in more detail how you will use the asset and who else will use the asset. If the asset is to be used by user groups and the general public please provide details of user groups and opening times.
9. What charges will there be to use the asset, i.e. entry/hire fees etc?
10. What is the catchment area for the project? What population will the asset serve?
11. Please provide details of how the wider community and service users will be involved in running the asset.
12. Please explain how the use of the asset will benefit the local community e.g:

Meets an existing need resulting from lack of local service	
Employment opportunities	
Income generation	

Training opportunities	
Environmental benefits	
Quality of life benefits	
Community Safety	
Others (please specify)	

13. Please give details of which key stakeholders were consulted, method of consultation and the support shown for the model.

Who have you consulted with?	How did you consult with them?	Do they support your plans?
Current asset users		
Local community		
Elected members		
Town or Community Council		
Other local community groups		
Others (Please specify)		

14. Timescales – please provide indicative timescales for when you would be able to start operating the asset.

SECTION C

Finance

Revenue and Operating Costs

15. Financial Information. Please provide a breakdown of costs for the first three years of the model.

Running costs Years 1 – 3 (provide breakdown for each year) Salary costs for staff Breakdown of overheads (Maintenance, heating insurance, council tax etc) Other Costs	
Projected Total Expenditure for each year Year 1 Year 2 Year 3	

Revenue and Operating Income

16. Financial Information. Please provide a breakdown of income for the first three years of the model.

Income for Years 1- 3 (provide breakdown for each year) Trading activities	
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<p>Fund raising activities</p> <p>Other forms of income</p>	
<p>Total Income for each year</p> <p>Year 1</p> <p>Year 2</p> <p>Year 3</p>	

Overall Revenue Position

17. Financial Information. Please provide a summary of profit/ loss for the first three years of the model based on your answers to 15 and 16.

<p>Net Profit / Loss for each year</p> <p>Year 1</p> <p>Year 2</p> <p>Year 3</p> <p>If you are projecting a loss how do you propose that this is managed? (In some circumstances the Council may consider providing some initial</p>	
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revenue support but even if this occurs this will be time limited)	
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Capital Requirements including Modifications, Major Maintenance and Refurbishment

If your business model involved access to external funding, please give details in questions 18, 19 and 20.

18. Please provide a summary of what you estimate to be the main requirements with a summary and cost estimate

Modifications	
Major Maintenance and Refurbishment	
Total	

19. What funding have you obtained so far?

Funding Source	Date of Application	Amount

20. What funding have you applied for but are still awaiting a response including any request for the Council to support these costs?

Funding Source	Date of Application	Amount

21. Provide details of any other sources of funding you might have access to, i.e. voluntary donations, borrowing etc.

SECTION E

Management Issues

22. Marketing Plan

Please describe how you will market the services to be provided from the asset.

23. Management Plan For The Asset

Please provide information on how the asset will be managed to ensure overall compliance with statutory requirements and to ensure it remains fit for purpose.

24. Monitoring

**Please describe how the business model will be monitored and evaluated.
Describe how this monitoring will be used to improve service delivery.
Describe how the long term impact of the business model will be evaluated.**

25. Risk Analysis

Please identify the main risks to your project and the action you will take to mitigate their effect.

SECTION F

Declarations

On behalf of (Enter organisation/individual Name)	
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I/We declare that all the information and statements contained within this application are true.

Primary Contact Name (Print)	Signature	Date

Chair of Organisation Name (Print)	Signature	Date

Please tick the box to confirm that the asset will NOT be operated as a commercial/private sector enterprise

Completed applications should be sent to Flintshire Local Voluntary Centre, Corlan, Unit 3, Mold Business Park, Mold, Flintshire CH7 1XP and marked '**Community Asset Transfer**'. Remember to include a copy of your constitution and any financial accounts with your application and any other information you feel may be appropriate in support of your application.