

Community Asset Transfer Scheme Application Form



Please note, you can complete this form on your computer or alternatively, print and complete in black or blue ink.

Application ID (for official purposes only)	
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Section 1. Eligibility	
1.1 Are you applying for a Community Asset Transfer (CAT) request under part five of the Community Empowerment (Scotland) Act 2015?	
<input type="checkbox"/> YES	<input type="checkbox"/> NO
1.2 In order for your application to be eligible you must meet all of the following criteria.	
If you cannot tick all of these boxes we will be unable to progress your application. We will accept this form online (and the enclosures detailed in section 8) or by email but you must still submit an original signed application form and an original bank statement by the required deadline. Further detail on each question is available in the accompanying Community Asset Transfer (CAT) guidance.	
<input type="checkbox"/> I am applying on behalf of a non-profit group/organisation	<input type="checkbox"/> My Community Transfer Body has a bank account in its own name
<input type="checkbox"/> My Community Transfer Body (CTB) has a constitutional document	<input type="checkbox"/> This application will benefit people from East Dunbartonshire.
<input type="checkbox"/> I am applying on behalf of a community controlled body with at least 20 members	<input type="checkbox"/> I can submit all the necessary enclosures (see section 8)

Section 2. Asset Details	
2.1 Name or location of asset	
2.2 Have you checked the Council owns the asset and that it is eligible for asset transfer via the East Dunbartonshire Asset Register?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.3 Please provide our asset reference number from the register:	
2.4 Type of asset transfer requested	
Lease (Term requested)	Rent Offered
Sale	Price Offered

Section 3. Contact Information	
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3.1 What is your Community Transfer Body (CTB) called? (Give the full name of your group/organisation).	
3.2 Contact person and role in CTB. This should usually be the person that is submitting this application on behalf of your group. Please explain your role in the group (e.g. chair person, secretary, etc.).	
Name	
Position	
3.3 Address The address given will be used for correspondence regarding this application.	
3.4 & 3.5 Please give the preferred day time phone number(s) and email address to reach you with questions about your application.	
3.4 Phone	
3.5 Email	

Section 4. Community Transfer Body Information

4.1 What does the CTB do? Describe your CTB overall aims and objectives. Tell us what your CTB was set up to do and/or summarise the actual activities that your CTB undertakes.

4.2 Where does the CTB meet? This should be the location where meetings take place or services are delivered.

4.3 Please give details of which community/communities your CTB works with or supports. Your CAT request can be made on behalf of a community of interest or a community of place.

4.4 Please give details of any assets your organisation currently owns, leases, manages or utilises. Please provide the address of the asset(s), whether you own, lease or manage it and from whom.

4.5 Does your constitution allow you to:

Take on the ownership of an asset? Yes No

Employ Staff? Yes No

Fundraise? Yes No

4.6 Do you have agreement of your CTB to undertake an Asset Transfer?

Yes No

Please submit six recent copies of minutes of your management committee identifying and including the minute of the agreement to undertake this CAT request.

Section 5. Financial Information

5.1 Please provide details of how your community project will be funded in the short and long term. Outline details of any grant applications that are relevant to this CAT request and, if these are not confirmed, when you expect to be informed of the outcome. Projects with annual financing over £10,000 will be expected to submit a business plan (and may be eligible for Business Gateway support).

All projects need to provide audited accounts for the past two years.

5.2 Please give details of any funding you receive / have received from East Dunbartonshire Council within the last two years.

Section 6. Partnership Working

6.1 Have you identified opportunities to work collaboratively and build partnerships?

If your CTB is acting as the lead applicant for a partnership application, please give the name(s) of the partner organisation(s)/group(s) and the main contact name(s). If you have more than five partners, please attach an additional sheet.

	Name of Organisation	Contact Name	Contact Details
Partner 1			
Partner 2			
Partner 3			
Partner 4			
Partner 5			

6.2 Please give details of any other voluntary organisations you will be/are working with, who are not partners in this bid. This may include organisations that will provide specialist advice or support, such as East Dunbartonshire Voluntary Action (EDVA), Development Trust Associations etc. Also, if applicable, please list if you have links with a National Body or National Governing Body.

	Name of Organisation	Contact Name	Type of Advice / Support
1			
2			
3			
4			
5			

6.3 Please detail the links you have with East Dunbartonshire Council Services (if any) and detail what these are and the Teams / Officer(s) you deal with.

Section 7. Details of Request for Community Asset Transfer

7.1 Why is your CTB requesting the ownership, lease or management of this asset? Do you have evidence of need for your proposal? What is the purpose and objectives of your community project? What benefits do you envisage and how would you measure if these have been achieved?

7.2 Does the identified asset have any Built and/or Natural Environmental designations located within or in close proximity to its boundaries? Please refer to Appendix 3 for additional information and if you are unsure please contact the Council Sustainability Team to ask.

YES (complete Environmental Screening) NO

7.3 Will people use the asset or do people currently use the asset (this can include staff)? If you are unsure please contact the Council to ask.

YES (complete Equality Impact Assessment) NO

7.4 Have you received any legal, technical or professional advice on your proposals, including any risk assessments? Please give details of which organisations/services have provided the advice, and details of any expertise within your membership.

7.5 What are the main risks associated with your project and how do you plan to mitigate these?

7.6 Please outline if your organisation has a policy or procedure in regard to the following?

Child Protection Yes No

Vulnerable Adults Yes No

Health and Safety	<input type="checkbox"/> Yes	<input type="checkbox"/> No
First Aid	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Insurance (provide details below)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>7.7 Are you intending to make any alterations to the building or land? If so, please refer to Section 2 of Environmental Screening form regarding 'Wider Sustainability Considerations'.</p> <p><input type="checkbox"/> Yes (please complete 7.8 and Environmental Screening) <input type="checkbox"/> No (please go to section 7.9)</p>		
<p>7.8 Please give details of the proposed alterations, and any technical, legal, planning or other professional advice you have received regarding the alterations.</p>		
<p>7.9 Please give details about who will use the asset? Who are the existing and target markets for your proposal?</p>		
<p>7.10 Please give details of how this facility will be of benefit to your CTB. A template business plan is available if you are considering a larger scale asset transfer request.</p>		
<p>7.11 Have you consulted the community? Detail results of community consultation exercises undertaken (including the methodology used, the results and the conclusions you are drawing from this) and plans for further consultation. Outline your knowledge of other similar existing community services and facilities in the area.</p>		

7.12 Please indicate which strategic objective(s) you will support and provide a brief statement detailing how you will achieve this:

- economic development
- regeneration
- public health
- social wellbeing or
- environmental wellbeing

whether agreeing to the request would be likely to reduce inequalities of outcome which result from socio-economic disadvantage

7.13 How will you fund the project and ensure its future sustainability? (This may include income generation through lettings, hire of facilities, charges, etc.).

7.14 Please demonstrate how your organisation has the capacity and experience to manage the facility. If your community project includes staff then please submit job descriptions for these staff outlining the required qualifications, experience and competences alongside rate of pay and how this will be paid.

Section 8. Enclosures

Please check that you have enclosed all of the necessary documents. Failure to do so may cause delays with your application and result in your application not being processed.

We prefer if you email attachments electronically however we must have copies of the original signed application and original bank statement. Please email these to assettransfer@eastdunbarton.gov.uk or post to the address below.

8.1 Please ensure you include the following documents with your application.

<input type="checkbox"/> A copy of your CTB's constitution (if you are a new community group we can provide support with this).	<input type="checkbox"/> A copy of your most recent audited accounts.
<input type="checkbox"/> Most recent original bank statement	<input type="checkbox"/> Annual report of your CTB
<input type="checkbox"/> Six recent minutes of your organisational management meeting including the minute of the agreement to the CAT request	<input type="checkbox"/> Equality Impact Assessment (if applicable) <input type="checkbox"/> Environmental Screening (if applicable)

If your CAT request involves annual financing of over £10,000 you must also submit a business plan which details a financing plan for your proposal. A template is provided and you may be eligible for Business Gateway support.

If your CAT request involves staff you must submit a job description for each post outlining the required qualifications, experience and competences alongside rate of pay and how this will be paid.

<input type="checkbox"/> Business Plan	<input type="checkbox"/> A job description for each post (this helps us ascertain required skills and experience)
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Section 9. Declaration

9.1 The following statement must be read and two signatures provided: Signatory 1 should be the person who has filled out this form. Signatory 2 should be the Chair, Vice-Chair, Treasurer or Secretary of your CTB. This signatory must be different from signatory 1.

I confirm that I am allowed to submit this application on behalf of my Community Transfer Body. I also confirm that this application has been filled out accurately.

Signatory 1	
Signatory 2	

Please send completed forms, attaching an additional information to:

**Community Asset Transfer team
East Dunbartonshire Council
Southbank House
Southbank Business Park
Kirkintilloch
G66 1XJ**

Tel: 0300 123 4510

e-mail: AssetTransfer@eastdunbarton.gov.uk

Data Protection Act 1998

The information provided on this form will be processed by *East Dunbartonshire Council* in accordance with the Data Protection Act 1998. The data you provide will be used for improving the administration of the Community Asset Transfer Scheme; consult with you; help promote your CTB; advise you of training opportunities; and keep you up to date with other news that may affect your group.

Your information may be shared with our colleagues in the Council and the voluntary sector. If you do not wish your group's details to be shared please tick this box.

Other Formats & Translations

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Corporate Communications Team at 12 Strathkelvin Place, Kirkintilloch, G66 1TJ, tel 0300 123 4510

本文件可按要求翻譯成中文，如有此需要，請電 0300 123 4510。

اس دستاویز کا درخواست کرنے پر (اردو) زبان میں ترجمہ کیا جاسکتا ہے۔ برائے مہربانی فون نمبر 0300 123 4510 پر رابطہ کریں۔

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 123 4510 ਛੋਨ ਕਰੋ।

Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòin gu 0300 123 4510

ਅਨੁਰੋਧ ਕਰਨੇ ਪਰ ਯह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 123 4510 पर फोन कीजिए।