Newport City Council Property Grant Schemes

Urban Centre Property Enhancement Fund

Urban Centre Living Grant Fund

Expression of Interest





**Expression of Interest**

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| **SECTION 1 – APPLICANT DETAILS** | | | |
| Name of applicant: | | | |
| Address and postcode of organisation/ individual applying for grant: | | | Address and postcode of property to which application refers (if different): |
| Telephone No: | | | Telephone No: |
| Position in organisation: |  | | |
| Email address: |  | | |
| Your interest in the property? | Freehold  Leasehold | | |
| If Leasehold, what is the period of the lease? (This must be a minimum of 7 years) (Please note a copy of the lease and a letter of consent from the Freeholder will be required to be submitted with your application) | |  | |
| Please provide details of any existing mortgage or charges on the property. | |  | |

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| **SECTION 2 – PROJECT DETAILS** |
| Please select which grant you are interested in:  Urban Centre Property Enhancement Fund  Urban Centre Living Grant  Both |
| Please provide a short description of the proposed works including proposed end use. |
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| **SECTION 3 – PROJECT FINANCE** | |
| **Cost breakdown** | Value (£) |
| 1. Total estimated costs |  |
| 1. Other funding secured |  |
| 1. **Grant requested** |  |

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| **SECTION 4 – PROJECT OUTPUTS** |
| What benefits will the grant investment provide?   |  |  | | --- | --- | | Gross jobs created |  | | Number of jobs accommodated |  | | Enterprises accommodated |  | | Non-residential premises created or refurbished (sq m) |  | | Non-residential premises created or refurbished (number) |  | | Number of empty non-residential units brought back into use |  | | Number of additional market housing units |  | | Number of additional social housing units |  | | Number of non-residential units brought back in to use |  | |

Please return this completed form to: [Sarah.armstrong@newport.gov.uk](mailto:Sarah.armstrong@newport.gov.uk)