

"OTTO PER MILLE" PROJECT TAVOLA VALDESE

The present form has to be filled in completely.

A. APPLYING INSTITUTION

(Legally responsible for the project)

1. NAME OF APPLICANT:

2. LEGAL STATUS (Non profit corporation, Association, etc.):
.....

3. REGISTERED ADDRESS:

4. SUMMARY OF STATUTORY AIMS (Please enclose copy of Statute):
.....
.....

5. NAME OF THE LEGAL REPRESENTATIVE OF APPLICANT (Address, telephone, fax, email):

6. Has applicant already been made for an "OTTO PER MILLE" fund?
Yes..... No If yes, when?.....

7. How did you know about the possibility of the Waldesian Church to finance projects in Italy and abroad?

8. Do you know someone belonging to the Waldesian Church?

9. Is there someone (also a Church, an Institution) who knows your association that we can contact for additional information?

B. PROJECT

1. TITLE OF PROJECT:

2. AIM OF PROJECT:
.....

3. DESCRIPTION OF PROJECT:
.....
.....

4. PLACE WHERE IT WILL BE CARRIED OUT, ADDRESS:
.....

5. LEGAL OWNER OF LAND IN POSSESSIONS OR TO BE ACQUIRED ON WHICH PROJECT IS TO CARRIED OUT.....

6. NUMBER OF PEOPLE WHO WILL BENEFIT FROM IT:

	Men	Women	Total
Total

7. NAME OF PERSON RESPONSIBLE OF APPLICANT (Address, Telephone, fax, e-mail, etc.):
.....
.....

8. COSTS (Please express it in Euro):

Construction / Acquisition	.....	.....
Setting up	.....	.....
Planning	.....	.....
Unknown factors	.....	.....
Permits / Council authorisations	.....	.....
VAT / Tax	.....	.....
TOTAL	.....	.....

N.B. Please enclose quotations or detailed analyses of costs, and an inflation analysis.

9. SOURCES OF INCOME:

Disposal Funds

Own funds	.....	.....
Gifts and bequests already received		
Gifts and bequests promised		
Loans already granted		
TOTAL	.....	.....

Funds to obtain

Own funds

Possible gifts and bequests

Possible loans

Otto per Mille funds requested

TOTAL

10. Funds requested from other national/international organisations (Enclose details of previous figures):

.....

11. LONG TERM LOANS AND DEBTS:

.....

12. BANK TO WHOM PAYMENTS SHOULD BE MADE:

NAME OF THE BANK

HOLDER OF THE BANK.....

ACCOUNT NUMBER

BANK CODE.....

13. INFORMATION ON THE APPLICANT'S FINANCIAL SITUATION:

- Total number of members:

- Normal financial support:

14. SIGNATURE OF APPLICANT'S LEGAL REPRESENTATIVE:

15. DATE:

16. PROJECT ANNEXES:

1. Copy of Statute
2. Copy of the balance or of the statement of account of the last two years
3. Power of attorney of the Legal Representative
4. Plans (for immovable projects)
5. Location (plans, maps, etc.)
6. Cadastral Map (for immovable projects)
7. Photographs
8. Detailed Budget
9. Inflation trend (if relevant)
10. Cash flow of the last year (if available)

The list of annexes is approximate. Applying institutions have to furnish only those annexes which best respond to the characteristics of the association or to the characteristics of project.

The applying institutions can provide any additional information which can help to explain the project.

Further annexes will be appreciated by the Commission.