



Tionscatal Éireann  
Project Ireland  
2040



An Roinn Forbartha  
Tuaithe agus Pobail  
Department of Rural and  
Community Development

## CLÁR FUNDING 2020

### APPLICATION FORM FOR

### MEASURE 3(B) MOBILITY AND CANCER CARE SUPPORT

<b>Name of Applicant/Organisation/Group:</b>	
<b>Contact Person and Position Held:</b>	
<b>Correspondence Address:</b>	
<b>Correspondence Email:</b>	
<b>Correspondence Telephone:</b>	
<b>Location / general area of operation:</b> Provide details of 80% of need attributable to CLÁR areas.	
<b>Please provide the Eircode or GPS Co-ordinates of where the vehicle will be based:</b>	
<b>Summary description of proposed vehicle or vehicle adaptation to be funded:</b>	

<b>Total cost of vehicle/fitout:</b>	€
<b>Amount of Match Funding being provided by applicant under this application:</b> (Minimum 10% of total project cost)	€
<b>Match funding evidence attached (Y/N):</b>  (E.G. Bank statement showing balance available or similar)	
<b>Amount being sought under this CLÁR application:</b>	€
<b>Amount of Cash Contribution:</b>	€
<b>Philanthropic contribution (up to 10% of total cost) :</b>	€
<b>Has an application for funding for this project been submitted to any other scheme or programme in the past year (Y/N):</b>  If yes, please provide details.	
<b>Letter(s) of support attached (Y/N):</b>	
<b>Detail regarding status and establishment of organisation/group attached (Y/N):</b>	
<b>Does your organisation operate on an entirely voluntary basis (Y/N):</b>  Please provide details.	
<b>Are your transport services provided free of charge (Y/N):</b>  Please provide details.	
<b>Do you have volunteer drivers with the necessary licence to drive the vehicle being applied for (Y/N):</b>  Please provide details.	
<b>Will your organisation be in a position to provide the necessary insurance, tax and ongoing maintenance of the vehicle (Y/N):</b>	

<b>Please provide details.</b>	
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<b>Provide a short description of your organisation and it's current activities which support the requirements in the Scheme Outline:</b>

<b>Provide a detailed outline (including indicative costings) of the vehicle(s) and/or adaptation(s) proposed under this application:</b>

**Outline the need for the Vehicle:**

**I declare that the information provided by me on this application form is truthful and complete.**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Position:** \_\_\_\_\_