**Salix Recycling Fund**

**Application Form**

Scotland 2020-21

Please return the completed version of this form to:

scotland@salixfinance.co.uk

|  |  |
| --- | --- |
| **Organisation** |  Click here to enter text. |
| **Form Completed By** |  Click here to enter text. |
| **Dated Submitted** |  Click here to enter a date. |

**1. Organisational contact details**

* 1. **Organisation information**

|  |  |
| --- | --- |
| **Legal Name** |  |
| **Type**  |  |
| **Address** |  |
| **Postcode** |  |

* 1. **Primary contact details**

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Department** |  |
| **Address** |  |
| **Postcode** |  |
| **Office Telephone (including extension)** |  |
| **Mobile Telephone** |  |
| **Email Address** |  |

* 1. **Sponsoring director details**

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Address** |  |
| **Postcode** |  |
| **Office Telephone (including extension)** |  |
| **Email Address** |  |

**2. Funding application information**

**2.1 Fund size**

|  |  |
| --- | --- |
| **Total Salix Funding Requested** |  |
| **Client Match Funding Provided** |  |

**2.2 Fund management information**

|  |  |
| --- | --- |
| **Energy Manager** |  |
| **Appointed Fund Manager** |  |
| **Do you intend to make use of the Management Charge1?** |  |
| **Do you intent to make use of the early repayment option1?** |  |
| **Organisation’s approximate annual energy spend** |  |

**3. Fund management information**

Please complete the table below, or attach a simple organisation structure to this application, listing the relevant personnel and how they relate to the Sponsoring Director and Fund Manager.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Position** | **Role/ Relevant Responsibilities** | **% FTE2** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1 Details of the management charge and repayment options can be found in the Salix fund manual
 2 FTE - Full Time Equivalent employee - % of time spent on fund activity
 Resource ratio of 1 FTE per £1m spend as per National Audit Office guidelines

**4. Documentation to be submitted**

**Please confirm you have attached the following documents (Y/N):**

|  |  |
| --- | --- |
| **Completed Project Compliance Tool** |  |
| **Relevant Supporting Calculations** |  |
| **Carbon Management Plan** |  |
| **Letter of Support from Sponsoring Director** |  |

**5. Declaration**

*Please electronically sign the below, or alternatively print this application form, sign and scan the below declaration.*

**In completing this application, we confirm that:**

* We have read the Salix Finance Fund Manual for the Salix Recycling Fund.
* The information supplied is true and correct.
* Sponsoring Director or equivalent confirms that matched funding of the value stated in Section 2.1 will be made available.

|  |  |  |
| --- | --- | --- |
|  | **Author** | **Sponsoring Director** |
| **Signature** |  |  |
| **Date** |  |  |
| **Name** |  |  |
| **Position** |  |  |