



Fermanagh & Omagh
District Council
Comhairle Ceantair
Fhear Manach agus na hÓmaí

Claim Pack

Bursary - Arts

A sample claim pack can be viewed on the Council's website:
www.fermanaghomagh.com, under Funding & Grants or if you require Officer
assistance please contact the Funding & Investment Unit
Tel: 0300 303 1777 Email: grants@fermanaghomagh.com



Fermanagh and Omagh District Council Claim Checklist

Checklist:

| | | YES/NO |
|----|---|--------|
| 1. | Claim Form (Signed, <i>attached</i>) | |
| 2. | Original Invoices | |
| 3. | Bank Automated Clearing System - (BACS) (Signed, <i>attached</i>) | |
| 4. | Post-Project Evaluation Form (Signed, <i>attached</i>) | |
| 5. | Evidence of Outputs & Specific Requirements (As outlined in your letter of offer) | |
| 6. | Any Other Information as Requested | |

Please complete this claim pack once the event/project has taken place and submit the necessary documentation by the **Claimed For By Date outlined in your Letter Of Offer.**

PLEASE RETURN TO:

**Grant Claims
Funding and Investment Unit
Fermanagh and Omagh District Council**

Either:

**2 Townhall Street
Enniskillen
Co Fermanagh
BT74 7BA**

or

**The Grange
Mountjoy Road
Omagh
Co Tyrone BT79 7BL**

Audit: Please note your project/event could be selected for a full audit at any time by Fermanagh and Omagh District Council. All relevant documentation in relation to your project/event must be made available if requested. Failure to provide all necessary documentation may result in claw back of funding and/or future funding being withheld.

Funding and Investment - Expenditure Claim Form

| Participant Name | | | | | | | |
|------------------------------|-------------------------------------|----------|-----------|-------------------------------|-----|-------|------------|
| Project Title: | | | | | | | |
| Project / Event Date: | | | | Grant Funding Awarded: | | | |
| Invoice Date | Description of Eligible Expenditure | Supplier | Date Paid | Net | Vat | Total | Office Use |
| | | | | | | | Inv |
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| Total | | | | | | | |

I request grant assistance from Fermanagh and Omagh District Council's Funding and Investment Unit on the eligible expenditure ofas detailed above and agreed in the Letter of Offer dated.....

Signed: _____

Date: _____

| | |
|---|-------------|
| OFFICIAL USE ONLY | |
| Checked: _____ (Funding & Investment Officer/Project Officer) | Date: _____ |
| Comments: _____ | |



BANK AUTOMATED CLEARING SYSTEM (BACS)

In order to process your grant payment FODC require your bank account details.
To facilitate this please complete and return this form along with your grant aid claim.

| | |
|------------|--|
| NAME | |
| ADDRESS: | |
| | |
| | |
| POSTCODE: | |
| TELEPHONE: | |

| | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|
| BANK NAME & ADDRESS: | | | | | | | | | |
| | | | | | | | | | |
| NAME OF ACCOUNT HOLDER: | | | | | | | | | |
| | | | | | | | | | |
| SORT CODE: | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | |
| | | | | | | | | | |
| ACCOUNT NO: | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | |
| | | | | | | | | | |
| BUILDING SOCIETY ROLL NO (if applicable): | | | | | | | | | |

As a remittance will be issued by email please provide an email address:

| | |
|--------|--|
| EMAIL: | |
|--------|--|

| | | | | | | | | | |
|------------|---|--|--|--|--|--|--|--|--|
| NAME: | | | | | | | | | |
| SIGNATURE: | | | | | | | | | |
| DATE: | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | |
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Data Protection

In accordance with the Data Protection Act 2018, Fermanagh and Omagh District Council has a duty to protect any information we hold on you. The personal information you provide here will only be used for the purpose of procurement and payment and will not be shared with any third party unless law or regulation compels such a disclosure or in the processing of external funding applications and associated claims. For further guidance on how we hold your information please visit the Privacy section at www.fermanaghomagh.com/your-council/privacy-statement/



Post-Project Evaluation Form

Please Note A Completed Post-Project Evaluation Form Must Be Completed and Returned With Your Claim

| | |
|---|--|
| Project Details | |
| Name : | |
| Project/Event Name: | |
| Project/Event Date(s): | |
| Project/Event Location: | |
| Please detail how the outputs as outlined in your letter of offer have been attained. (Please use additional paper if required): | |
| | |

| | | |
|---|--|--|
| Number of people who participated in the event: | | |
| Total Project / Event Costs: | | |
| Income: (Please advise how much income was derived for this project/event, do not include the grant award from FODC) | Expenditure: (How much did your event cost in total?) | |
| £ _____ | £ _____ | |
| Signed: _____ Date: _____ | | |

Please return this completed **Claim Pack** and associated documentation as outlined in the Claim Checklist, (See Page 2) by the **Claimed For By Date** outlined in your **letter of offer** to:

'Grant Claims'
Funding and Investment Unit, Fermanagh and Omagh District Council

| | | |
|--|--|--|
| <p style="text-align: center;">2 Townhall Street Enniskillen Co Fermanagh BT74 7BA T: 0300 303 1777</p> | <p>Either:</p> <p>Or</p> | <p style="text-align: center;">The Grange Mountjoy Road Omagh, Co Tyrone BT79 7BL E: grants@fermanaghomagh.com</p> |
|--|--|--|