

Signpost 2 Grants Expression of Interest Form

Our Grant is available to any SME within the GCGP LEP area, as long as the applicant fulfils the criteria and conditions outlined in the **Terms & Conditions**. The aim of the Grant is to provide a flexible capital funding to assist SMEs to implement growth initiatives that have a measurable impact. The Grant can be used as a catalyst for growth or competitiveness or productivity – particularly initiatives that will enable the creation of new jobs. Please complete this form and email it to **info@nwes.org.uk**.

1. Company name			
2. Company address			
3. Contact name		4. Contact position	
5. Phone number		6. Mobile number	
7. Email address			
8. Legal status	SOLE TRADER PARTNERSHIP LIMITED COMPANY OTHER:		
9. Principal activities			

10. Please briefly summarise what you intend to use the Grant for.

11. If you are expecting to employ additional staff as a result of this investment, please state the number of full-time equivalents (FTEs) that you plan to create.
Number of new jobs created:

12. How would the grant help your business? Please provide details and specific outcomes, if possible.

13. What are the total estimated costs of the expenditure to which the grant will contribute?	£
14. What value of grant do you plan to apply for?	£

18. Does your business employ more than 249 people?	YES NO
19. Is your company's balance sheet more than €43 million (approx. £30 million)?	YES NO
20. Is your company's annual turnover more than €50 million (approx. £35 million)?	YES NO
21. What is your expected turnover for the current or next full financial year?	£

23. Have you received any other grants or State Aid in the last three years?	YES NO
--	----------

If you answered YES, please complete this table (and continue on a separate sheet if required):			
Date of payment	Name of provider	Amount awarded	Reason for payment
/ /		£	
/ /		£	
/ /		£	

I CONFIRM THAT THE INITIATIVES AND/OR INVESTMENTS OUTLINED HEREIN HAVE NOT ALREADY BEEN COMMISSIONED OR OTHERWISE COMMENCED, ORDERED, INVOICED OR SECURED WITH A DEPOSIT. I CONFIRM THAT THE INFORMATION PROVIDED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT MY DATA IS PROTECTED UNDER THE TERMS OF THE DATA PROTECTION ACT 1998. MY NAME AND BUSINESS INFORMATION WILL BE RETAINED ON NWES'S AND/OR GCGP LEP'S DATABASE IN ORDER TO PROGRESS MY REQUIREMENTS. THE INFORMATION IS USED TO HELP DEVELOP NEW SERVICES TO MEET BUSINESS NEEDS AND MONITOR TRENDS AS APPROPRIATE. IN PRODUCING THESE STATISTICS, INDIVIDUAL COMPANIES ARE NOT AND CANNOT BE IDENTIFIED.

Please email the completed form to info@nwes.org.uk.