

LEADER Rural Development Programme 2014 – 2020

Expression of Interest Form

NOTES:

- This form is an **Expression of Interest** for funding from the **LEADER** initiative and **does NOT constitute an Application for funding.**
- The purpose of this form is to determine if your project meets the general eligibility criteria.
- If your project meets the general eligibility criteria for funding under LEADER, you will be requested to complete the official application form, which will be used as the basis upon which your project will be assessed.
- The submission of an Expression of Interest form and/or the application form for LEADER assistance may not be taken as an indication that the project will be awarded grant aid.
- **Please complete a separate Expression of Interest Form for each project enquiry**
 - Please return this form to: Roscommon LEADER Partnership, Unit 12, Tower B, Roscommon West Business Park, Golf Links Road, Roscommon Town, Co. Roscommon
 - or e-mail to: claire@ridc.ie

ALL PROJECT DETAILS AND INFORMATION WILL BE TREATED WITH THE STRICTEST OF CONFIDENCE.

PLEASE COMPLETE IN BLOCK CAPITALS

1	<p>Details of Applicant:</p> <p>Name of Group/Individual/Business, etc.: _____</p> <p>Contact Person: _____</p> <p>Address: _____</p> <p>_____</p> <p>Tel No: _____ Fax No: _____</p> <p>E-mail: _____ Website address: _____</p>																
2	<p>Classification of Promoter: <i>Please cross appropriate box and provide the relevant number, if appropriate:</i></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> Private Individual/Sole Trader</td> <td style="width: 50%;">PPS No: _____</td> </tr> <tr> <td><input type="checkbox"/> Formalised Community/Voluntary groups</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Limited Companies</td> <td>Company Number: _____</td> </tr> <tr> <td><input type="checkbox"/> Companies Limited by guarantee</td> <td>CHY Number: _____</td> </tr> <tr> <td><input type="checkbox"/> Co-operative Societies</td> <td>Number: _____</td> </tr> <tr> <td><input type="checkbox"/> Partnership Agreement</td> <td><i>Please provide a signed copy of the agreement</i></td> </tr> <tr> <td><input type="checkbox"/> Public Body</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Other (Please Specify) _____</td> <td></td> </tr> </table>	<input type="checkbox"/> Private Individual/Sole Trader	PPS No: _____	<input type="checkbox"/> Formalised Community/Voluntary groups		<input type="checkbox"/> Limited Companies	Company Number: _____	<input type="checkbox"/> Companies Limited by guarantee	CHY Number: _____	<input type="checkbox"/> Co-operative Societies	Number: _____	<input type="checkbox"/> Partnership Agreement	<i>Please provide a signed copy of the agreement</i>	<input type="checkbox"/> Public Body		<input type="checkbox"/> Other (Please Specify) _____	
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4	<p>Project Title: _____</p>																
5	<p>Project Location: _____</p>																

6 Project Description,

8 What is the nature of assistance sought? (Please tick as appropriate)

Capital Expenditure Marketing/Promotion

Training Technical Assistance (Analysis & Development)

Other (Please Specify) _____

9 Have you applied to any public funding Agency, in respect of this project?

Roscommon County Council Roscommon County Enterprise Board

Fáilte Ireland National Lottery

FAS Teagasc

Heritage Council Bord Bia

Other Semi-State Agencies _____

Government Departments _____

Other (Please Specify) _____

10 Estimated Project Costs: *Please list items separately. Please use additional sheets if necessary.*

Items	€
Total Cost	€

11 Additional Information:
Do you currently have the following (if required for your proposed project)

Planning Permission & Conditions Evidence of Title/Leasehold

Current Tax Clearance Cert.

12 I/ We confirm that the details supplied are true and correct to the best of my knowledge

Signed: _____ **Date:** __ / __ / __

Name: Block Capitals _____

Part or all of the information you provide will be held on computer. This information will be used for the administration of applications and producing monitoring returns. LEADER Groups may share information with each other and government departments/agencies to enable them to prevent fraudulent applications or for detecting crime and to co-ordinate processing of complementary applications.