

**CYNGOR CYMUNED LLAN LLŶR
LLANYRE COMMUNITY COUNCIL**

APPLICATION FOR ASSISTANCE FROM RECYCLING FUNDS

Name:

Address and Telephone Number:

Are you applying as:-

An individual

or

A Group/Organisation

If applying as a Group/Organisation, please state name:-

Please state the reason for your application

Have you applied for funds from any other organisation?
If yes, please give details

Yes

No

Have you applied to the Recycling Fund in the past?
If yes, please give details

Yes

No

Signed:-

Date:-

Please return to: Mrs. Lynda Brown, Clerk to the Council, Dingle View,
Franksbridge, Llandrindod Wells, Powys, LD1 5SA.

THE DECISION OF LLANYRE COMMUNITY COUNCIL IS FINAL

For Community Council use only

Amount awarded £ _____

Date:- _____