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**CLÁR Funding 2020**

**Expression of Interest**

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| --- | --- | --- | --- |
| **Please tick Measure required:** | Measure 1 – Support for Schools/Community Safety | |  |
| Measure 2 – Community Recreation Areas | |  |
| Measure 3 - Community Wellbeing Support:  (a) Meals on Wheels and linked Services  (b) Mobility and Cancer Care Transport | |  |
| **Name of Applicant/ Organisation/Group:** | |  | |
| **Contact Person:** | |  | |
| **Correspondence Address:** | |  | |
| **Correspondence Email:** | |  | |
| **Correspondence Telephone No.:** | |  | |
| **Summary of proposed project to be funded: (Please refer to scheme outline for eligible items)** | |  | |
| **Total cost of project/equipment:** | | € | |
| **Amount being sought under this CLÁR application:** | | € | |

Please confirm that the following items will be in place upon request:

1. Match funding is available and ringfenced for the project.
2. All necessary permissions are in place.
3. Evidence of ownership/lease is available (if applicable).
4. The facility is/will be open to the public without appointment.
5. The project conforms to the LECP and/or other local or regional plans.
6. No funding has been allocated for the same project from any other sources.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expressions of Interest for Measures 1 and 2 must be submitted by email to the Community and Integrated Development Section, Mayo County Council at** [**community@mayococo.ie**](mailto:community@mayococo.ie) **and those for Measure 3(a) and (b) should be submitted directly to the Department of Rural and Community Development at** [**CLAR@drcd.gov.ie**](mailto:CLAR@drcd.gov.ie)**.**

**Closing date for receipt of all Expressions of Interest is Friday 7th August 2020.**