

Independent Retailer Grant Application Form

Please read the background information before submitting this form.

<http://www.testvalley.gov.uk/business/businessgrantsandsupport/grantsandfunding/independent-retailer-grant/>

1. **APPLICANT'S NAME**

2. **BUSINESS NAME**

BUSINESS ADDRESS

4. **Telephone Number**

e-mail address

5. **Date business is moving into town centre**

6. **Please give reasons why you are moving into Andover/Romsey town centre now**

7. **Type of business proposed**

8. **Have all necessary consents been received**

Yes **No**

9. How did you learn of the Independent Retailer Grant?

I declare that the information supplied is correct and I have read and understood the rules of the scheme. **Signature:**

When completed, please return this form to: *D Gleave, Economic Development Officer, Test Valley Borough Council, Beech Hurst, Weyhill Road, Andover, Hants SP10 3AJ* dgleave@testvalley.gov.uk

Counter-Terrorism and Security Act 2015: No activity which may be construed as radicalising or encouraging people into terrorism will be permitted to receive any grant. Should any allegation be received, or if the Council has reason to suspect non-compliance, the Council will investigate and may decide to cancel, modify or withdraw any offer or grant made to ensure compliance with the law.

Test Valley Borough Council Window Sticker

In accepting the Independent Retailer Grant the recipient agrees to display a (250mm x 150mm) sticker provided by the Council in their front window for a minimum of 12 months.

This is to inform people that TVBC supports local businesses.

Data Protection Statement

Any personal data you supply on this application form will only be used for purposes in connection with the I.R.G. scheme. TVBC would however like to include your details on a list of start up businesses which have received this grant. This list will only be available to other I.R.G recipients with who you may wish to collaborate, do business or share experiences.

If you do wish to be included on this list please tick this box

FOR COMPLETION BY TVBC

Date of first Council Visit:

Date of second Council visit (3 months after first visit):

Date of third Council visit (9 months after first visit):