Community Asset Transfer Scheme Application Form



Please note, you can complete this form on your computer or alternatively, print and complete in black or blue ink.

| Application ID (for official purposes only) | | | | | | |
|---|---|--|--|--|--|--|
| Section 1. Eligibility | | | | | | |
| 1.1 Are you applying for a Community As Empowerment (Scotland) Act 2015? | set Transfer (CAT) request under part five of the Community | | | | | |
| ■ YES | | | | | | |
| 1.2 In order for your application to be elig | ible you must meet all of the following criteria. | | | | | |
| If you cannot tick all of these boxes we will be unable to progress your application. We will accept this form online (and the enclosures detailed in section 8) or by email but you must still submit an original signed application form and an original bank statement by the required deadline. Further detail on each question is available in the accompanying Community Asset Transfer (CAT) guidance. | | | | | | |
| ■ I am applying on behalf of a non-profit group/organisation ■ My Community Transfer Body has a bank account in its own name | | | | | | |
| My Community Transfer Body (CTB) has a constitutional document This application will benefit people from East Dunbartonshire. | | | | | | |
| ■ I am applying on behalf of a community controlled body with at least 20 members | | | | | | |
| | | | | | | |
| Section 2. Asset Details | | | | | | |
| 2.1 Name or location of asset Fla | it, 84 Borland Road, Bearsden, G61 2NE | | | | | |
| 2.2 Have you checked the Council owns to Dunbartonshire Asset Register? | the asset and that it is eligible for asset transfer via the East | | | | | |
| ■ Yes | | | | | | |
| 2.3 Please provide our asset reference number from the register: 000132047958 (assuming the flat is part of the pavilion) | | | | | | |
| 2.4 Type of asset transfer requested | | | | | | |
| Lease (Term requested) 25 years Rent Offered £1 per annum, if asked | | | | | | |
| Sale | Price Offered | | | | | |

Section 3. Contact Information

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| • | Milngavie and Bearsden Men's Shed CTB. This should usually be the person that is submitting this roup. Please explain your role in the group (e.g. chair person, | |
| Name | Redacted | |
| Position | Secretary | |
| 3.3 Address The address given will be used for correspondence regarding this application. | The Pagoda, King George V Park Borland Road, Bearsden G61 2NE | |
| 3.4 & 3.5 Please give the preferred day time phone number(s) and email address to reach you with questions about your application. | | |
| 3.4 Phone | REDACTED | |
| 3.5 Email | REDACTED | |

Section 4. Community Transfer Body Information

4.1 What does the CTB do? Describe your CTB overall aims and objectives. Tell us what your CTB was set up to do and/or summarise the actual activities that your CTB undertakes.

The Milngavie and Bearsden Men's Shed 's purposes are to advance the health and wellbeing; relieve the needs by reason of social isolation; enable the community involvement; and provide a recreational facility for use of primarily, but not exclusively, adult men of all ages and backgrounds living in East Dunbartonshire.

4.2 Where does the CTB meet? This should be the location where meetings take place or services are delivered.

The Milngavie and Bearsden Men's Shed meets at the Pagoda building in King George V Park a minimum of 5 days, between the hours of 10:00 and 16:00 hrs.

4.3 Please give details of which community/communities your CTB works with or supports. Your CAT request can be made on behalf of a community of interest or a community of place.

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| All communities within Milngavie, B | earsden and other areas of East Du | nbartonshire | |
|--|---|---------------------------|--|
| 4.4 Please give details of any assets y Please provide the address of the ass | | | |
| We currently lease the Pagoda building | | 7 | |
| The Pagoda, King George V Park Borland Road, Bearsden G61 2NE | | | |
| 4.5 Does your constitution allow you to | o: | | |
| Take on the ownership of an asset? | ■ Yes | ☐ No | |
| Employ Staff? | ■ Yes | ☐ No | |
| Fundraise? | ■ Yes | ☐ No | |
| 4.6 Do you have agreement of your C | TB to undertake an Asset Transfer? | | |
| ■ Yes | ☐ No | | |
| Please submit six recent copies of minutes of your management committee identifying and including the minute of the agreement to undertake this CAT request. | | | |
| | * | | |
| Section 5. Financial Informa | tion | | |
| E 4 Diagram was side details of best constant | a a na na unit un na ia at utill ha fundad in | the short and law attacks | |

5.1 Please provide details of how your community project will be funded in the short and long term. Outline details of any grant applications that are relevant to this CAT request and, if these are not confirmed, when you expect to be informed of the outcome. Projects with annual financing over £10,000 will be expected to submit a business plan (and may be eligible for Business Gateway support).

All projects need to provide audited accounts for the past two years.

Short term funding would be provided by Milngavie and Bearsden Men's Shed, thereafter the project would repay any expenses incurred and be self-sufficient. It is envisaged that rooms would be hired at a rate of approx.£10 per hour, but this would only apply to renters generating revenue from the hire, community meetings etc would be exempt. The annual turnover would be expected to be around £5000-6000 per annum, falling well below the £10,000 threshold necessitating a full business plan.

| 5.2 Please give details of any funding you receive / have received from East Dunbartonshire | Council |
|---|---------|
| within the last two years. | |

19/4/23 £1400 EDC Creditors 121304 19/10/23 £2949 EDC Creditors 1231113 14/3/24 £200 EDC Creditors 1419 10/4/24 £2846 EDC Creditors 13681 26/7/24 £1259 EDC Creditors 114252

| Section 6. Partnership Working |
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6.1 Have you identified opportunities to work collaboratively and build partnerships?

No

If your CTB is acting as the lead applicant for a partnership application, please give the name(s) of the partner organisation(s)/group(s) and the main contact name(s). If you have more than five

partners, please attach an additional sheet.

| | Name of Organisation | Contact Name | Contact Details |
|-----------|----------------------|--------------|-----------------|
| Partner 1 | | | |
| Partner 2 | | | |
| Partner 3 | | | |
| Partner 4 | | | |
| Partner 5 | | | |

6.2 Please give details of any other voluntary organisations you will be/are working with, who are not partners in this bid. This may include organisations that will provide specialist advice or support, such as East Dunbartonshire Voluntary Action (EDVA), Development Trust Associations etc. Also, if applicable, please list if you have links with a National Body or National Governing Body.

| | Name of Organisation | Contact Name | Type of Advice / Support |
|---|---------------------------------|--------------|--------------------------|
| 1 | Milngavie in Bloom | | practical support |
| 2 | Bearsden in Bloom | I | practical support |
| 3 | Killermont Parks DevGroup | | practical support |
| 4 | Killermont Crafters | | meeting space |
| 5 | Bearsden East Community Council | | meeting space |

6.3 Please detail the links you have with East Dunbartonshire Council Services (if any) and detail what these are and the Teams / Officer(s) you deal with.

| EDC Street Scene - refurbish park benches - |
|---|
| |
| Section 7. Details of Request for Community Asset Transfer |
| 7.1 Why is your CTB requesting the ownership, lease or management of this asset? Do you have evidence of need for your proposal? What is the purpose and objectives of your community project? What benefits do you envisage and how would you measure if these have been achieved? |
| The Milngavie and Bearsden Men's Shed is a very popular organisation with a membership of over 250. The Pagoda building has been refurbished from derelict by ourselves, but has limited scope for expansion. As our membership increases monthly, the demands on facilities grows, and this means we are critically short of space. The property which is the subject of this asset transfer request is located between our two currently leased properties. Access to this property would allow us to reorganise our usage of space within the Pagoda building to better serve our members by moving the technology equipment into a quiet and clean space. We only anticipate using one of the rooms for this purpose, but since we have a close relationship with the local community, we would develop this by offering short lets of the other rooms for community use. Success in this project would deliver yet more close contact with the local community will benefit both the shed and the local residents. Success with this project would be measured by number of hires requested. |
| 7.2 Does the identified asset have any Built and/or Natural Environmental designations located within or in close proximity to its boundaries? Please refer to Appendix 3 for additional information and if you are unsure please contact the Council Sustainability Team to ask. |
| ■ YES (complete Environmental Screening) □ NO |
| 7.3 Will people use the asset or do people currently use the asset (this can include staff)? If you are unsure please contact the Council to ask. |
| |
| ■ YES (complete Equality Impact Assessment) □ NO |
| YES (complete Equality Impact Assessment) NO 7.4 Have you received any legal, technical or professional advice on your proposals, including any risk assessments? Please give details of which organisations/services have provided the advice, and details of any expertise within your membership. |
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| Health and Safety | ■ Yes | □ No |
|---|--|-------------------------------------|
| First Aid | ■ Yes | □ No |
| FIISt Alu | I 165 | |
| Insurance (provide details below) | ■ Yes | ☐ No |
| Markel International Insurance Cor | mpany Ltd - policy number S2585 | 9 |
| | | |
| 7.7 Are you intending to make any of Environmental Screening form | <u> </u> | • |
| Yes (please complete 7.8 a | nd Environmental Screening) | ■ No (please go to section 7.9 |
| 7.8 Please give details of the prop professional advice you have rece | · | al, legal, planning or other |
| N/A | | |
| | | |
| | | |
| 7.9 Please give details about who your proposal? | will use the asset? Who are the e | xisting and target markets for |
| The Milngavie and Bearsden Men' remaining rooms would be offered businesses who may want to use t meetings, support groups etc | for short term lets by the hour, da | y or week, to local individuals and |
| 7.10 Please give details of how the available if you are considering a l | - | · |
| The Milngavie and Bearsden Men's Si of over 250, this means we are critical currently leased properties. Access to | lly short of space and the subject prop | perty is located between our two |
| 7.11 Have you consulted the commundertaken (including the methodothis) and plans for further consultate services and facilities in the area. | ology used, the results and the co | nclusions you are drawing from |
| Community social media canvassed for Personal canvassing - mixed views, but Killermont Parks Development Group - Searsden East Community Council - su Other than the local church, which is at readily available community spaces identification. | general support for community use support for community use pport for community use capacity, and the Bearsden Hub which | |

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| 7.12 Please indicate which strategic objective(s) you will support and provide a brief statement detailing how you will achieve this: |
|--|
| □ economic development□ regeneration■ public health |
| social wellbeing or environmental wellbeing |
| whether agreeing to the request would be likely to reduce inequalities of outcome which result from socio-economic disadvantage |
| The fundamental basis of our organisation is to promote mental health, reduce isolation, and engage with the local community. Being able to offer community space would encourage and increase local interaction |
| 7.13 How will you fund the project and ensure its future sustainability? (This may include income |
| generation through lettings, hire of facilities, charges, etc.). |
| Short term funding would be provided by Milngavie and Bearsden Men's Shed, thereafter the project would repay any expenses incurred and be self-sufficient. It is envisaged that rooms would be hired at a rate of approx. £10 per hour, but this would only apply to renters generating revenue from the hire, community meetings etc would be exempt. Actual pricing would be based on room sizes and potential, but since we have been denied access to the property, and our requests for plans have been ignored, the details have yet to be fixed. This project is not meant to generate revenue beyond covering its own expenses, and any surplus thereafter would be added to the Milngavie and Bearsden Men's Shed funds. |
| 7.14 Please demonstrate how your organisation has the capacity and experience to manage the facility. If your community project includes staff then please submit job descriptions for these staff outlining the required qualifications, experience and competences alongside rate of pay and how this will be paid. |
| The Milngavie and Bearsden Men's Shed has been in existence for over seven years, in this time we gained a lease on the derelict Pagoda building, refurbished it to a very high standard, and have occupied it for six and a half years. During this time, we have successfully gained grants and raised funds to grow our facilities and membership. |
| |

Section 8. Enclosures

Please check that you have enclosed all of the necessary documents. Failure to do so may cause delays with your application and result in your application not being processed.

| | ally however we must have copies of the original signed se email these to assettransfer@eastdunbarton.gov.uk |
|---|--|
| 8.1 Please ensure you include the following do | ocuments with your application. |
| A copy of your CTB's constitution (if you are a new community group we can provide support with this). | A copy of your most recent audited accounts. |
| Most recent original bank statement | Annual report of your CTB |
| Six recent minutes of your organisational management meeting including the minute of | Equality Impact Assessment (if applicable) |
| the agreement to the CAT request | Environmental Screening (if applicable) |
| which details a financing plan for your proposa Business Gateway support. If your CAT request involves staff you must sul | of over £10,000 you must also submit a business plan il. A template is provided and you may be eligible for bmit a job description for each post outlining the tences alongside rate of pay and how this will be paid. |
| ☐ Business Plan | A job description for each post (this helps us ascertain required skills and experience) |
| | |
| Section 9. Declaration | |
| | two signatures provided: Signatory 1 should be the 2 should be the Chair, Vice-Chair, Treasurer or different from signatory 1. |
| I confirm that I am allowed to submit this ap Body. I also confirm that this application h | as been filled out courseful. |
| Signatory 1 | |
| Signatory 2 | |
| | |
| | |
| | <u> </u> |

Please send completed forms, attaching an additional information to:

Community Asset Transfer team East Dunbartonshire Council Southbank House Southbank Business Park Kirkintilloch G66 1XJ

Tel: 0300 123 4510

e-mail: AssetTransfer@eastdunbarton.gov.uk

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The information provided on this form will be processed by *East Dunbartonshire Council* in accordance with the Data Protection Act 1998. The data you provide will be used for improving the administration of the Community Asset Transfer Scheme; consult with you; help promote your CTB; advise you of training opportunities; and keep you up to date with other news that may affect your group.

Your information may be shared with our colleagues in the Council and the voluntary sector. If you do not wish your group's details to be shared please tick this box.

Other Formats & Translations

This document can be provided in large print, Braille or on CD and can be translated into other community languages. Please contact the Council's Corporate Communications Team at 12 Strathkelvin Place, Kirkintilloch, G66 1TJ, tel 0300 123 4510

本文件可按要求翻譯成中文,如有此需要,請電 0300 123 4510。 $- \sqrt{19} \int_{-\infty}^{\infty} \sqrt{1} \int_{-\infty}^{\infty} \sqrt{19} \int_{-\infty}^{\infty}$

ਇਸ ਦਸਤਾਵੇਜ਼ ਦਾ ਮੰਗ ਕਰਨ ਤੇ ਪੰਜਾਬੀ ਵਿੱਚ ਅਨੁਵਾਦ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਕਿਰਪਾ ਕਰਕੇ 0300 I23 4510 ਫ਼ੋਨ ਕਰੋ। Gabhaidh an sgrìobhainn seo cur gu Gàidhlig ma tha sin a dhìth oirbh. Cuiribh fòin gu 0300 I23 4510 अनुरोध करने पर यह दस्तावेज हिन्दी में भाषांतरित किया जा सकता है। कृपया 0300 I23 4510 पर फोन कीजिए।