



# Application for registration

<b>CHARITY COMMISSION USE ONLY:</b>	Organisation number	Case number
	<input type="text"/>	<input type="text"/>

Some of the information you give in this form will become publicly available on the Register of Charities in accordance with s.3 of the Charities Act 1993 as amended by the Charities Act 2006 - we have marked those fields with the symbol **P**.

Please see the separate **Guidance Notes** for help on all parts of the form, marked with the symbol **i**.

## **A** About the organisation seeking registration

### **A1** What is your organisation's name? **P** **i**

Main name

  
  
  
Working name/acronym  

### **A2** Contact for the purpose of this application **i**

Full name

  
Address  
  
  
  
  
 Postcode   
Email address  
  
Telephone number  Alternative telephone number 

### **A3** Assessing eligibility for registration **i**

Please confirm your organisation is required to register for all of the following reasons:

- |   |   |  |
|---|---|--|
| (a) it has a gross annual income of more than £5000 a year        | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| (b) it is not exempt or excepted from the requirement to register | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| (c) it is governed by the laws of England and Wales               | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |

**A3 Assessing eligibility for registration****i**

If you cannot confirm (a)-(c), please explain why in the box below.

The Charity's income is below £100,000 and therefore it is not currently required to register. However this application is being made in conjunction with five other applications some of which are required to register and with a view to bringing all six charities under one umbrella charity via section 96(6) Charities Act 1993

**A4 Operating in Scotland?****i**

(a) Is your organisation registered or will it be registering with the Office of the Scottish Charities Regulator (OSCR) as well?

Yes  No

(b) If 'Yes' and already registered with OSCR, what is your OSCR registered number?

S C

(c) Have you ever had an application rejected by the OSCR?

Yes  No

If 'Yes', please explain why in the box below.


**A5 Finance and funding****i**

(a) If your organisation has existed for more than a year **and** you have published accounts, please provide the gross income as recorded in the accounts

£ 37812.39

(b) Otherwise please enter:

(i) the estimated gross income in the first year of operation

£ \_\_\_\_\_

(ii) the amount currently received

£ \_\_\_\_\_

(c) Financial year end date

3 1 1 2 2 0 0 8

(d) How has your organisation raised its funds and/or how does it intend to do so in future?

Original funds arose from scheme of Charity Commission 17/12/1998  
Donations are also received from the URC community via legacies or gifts

(e) Do you intend to use professional fundraising consultants?

Yes  No

**A6 Special circumstances****i**

Are there any special circumstances concerning your application that you wish to bring to our attention? (Please see the accompanying notes for the kind of information we would like to know.)


## B1 Governing document

Please indicate which type of governing document your organisation has by ticking ONE of the following boxes.

Constitution	<input type="checkbox"/>	Trust deed	<input type="checkbox"/>
Will	<input type="checkbox"/>	Act of Parliament	<input type="checkbox"/>
Memorandum and articles	<input type="checkbox"/>	Registered company number	<input type="text"/>
Other - please specify below	<input type="checkbox"/>		

Scheme of the Charity Commissioners dated 17th December 1998

Date governing document became effective

1 7 1 2 1 9 9 8

## B2 Complete ONLY if you have set up a company to replace an existing charity

(a) What is the registered charity number of the existing charity?

(b) Is the wording of the objects clause exactly the same as the existing charity?

Yes  No

If 'No', please explain why you have made the change.

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## B3 Approved governing document

Have you adopted an *approved governing document*?

Yes  No

(a) If 'Yes', what is the name of the body that issued the approved governing document?

(b) Do you have permission to use this?

Yes  No

(c) Are you using exactly the same wording as the approved governing document (other than filling any blanks or choosing between optional paragraphs)?

Yes  No

(d) If you have made any changes to the wording of the approved governing document, please highlight these on the copy of your governing document that you send to us and explain why you have made the changes in the box below.

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## C Assessing the organisation's public benefit



The wording of the objects clause is one of the main cornerstones of our assessment of whether the organisation is charitable. Please read the guidance notes on this subject very carefully.

Object 1 - Please enter in the box below the first (or only) object exactly as it appears in your governing document **P**

The object of the charity is the relief of poverty of persons who are in need of housing and are:

- a) retired ministers and their spouses, or
- b) the widows and widowers of retired ministers

Ways of carrying out Object 1. Include here details about how your organisation's aims, as expressed in this object, are, or will be carried out for the public benefit.

- (1) Purchase of suitable properties.
- (2) Making acquired properties available for occupation by the above beneficiaries who do not qualify for assistance from the general United Reformed Church scheme and who formerly served within Thames North Province.
- (3) Maintaining these properties and contributing towards their running costs.
- (4) Making grants available towards sheltered housing costs.

There is no detriment or harm arising from carrying out the organisation's aims.

Select at least one category in each of the three sections to describe what the organisation will do. Please read the notes carefully before completing this.

(a) What does your organisation do?

General purposes	<input type="checkbox"/>	Education/training	<input type="checkbox"/>
Medical/health/sickness	<input type="checkbox"/>	Disability	<input type="checkbox"/>
Relief of poverty	<input checked="" type="checkbox"/>	Overseas aid/famine relief	<input type="checkbox"/>
Accommodation/housing	<input type="checkbox"/>	Religious activities	<input type="checkbox"/>
Arts/culture	<input type="checkbox"/>	Sport/recreation	<input type="checkbox"/>
Animals	<input type="checkbox"/>	Environment/conservation/heritage	<input type="checkbox"/>
Economic/community/development/employment	<input type="checkbox"/>	Other or none of these	<input type="checkbox"/>

(b) Who does your organisation help?

Children/young people	<input type="checkbox"/>	Elderly/old people	<input type="checkbox"/>
People with disabilities	<input type="checkbox"/>	People of a particular ethnic or racial origin	<input type="checkbox"/>
Other charities/voluntary bodies	<input type="checkbox"/>	Other defined groups	<input checked="" type="checkbox"/>
The general public/mankind	<input type="checkbox"/>		

(c) How does your organisation operate?

Makes grants to individuals	<input checked="" type="checkbox"/>	Makes grants to organisations	<input checked="" type="checkbox"/>
Provides other finance	<input type="checkbox"/>	Provides human resources	<input type="checkbox"/>
Provides buildings/facilities/open space	<input checked="" type="checkbox"/>	Provides services	<input type="checkbox"/>
Provides advocacy/advice/information	<input type="checkbox"/>	Sponsors or undertakes research	<input type="checkbox"/>
Acts as an umbrella or resource body	<input type="checkbox"/>	Other or none of these	<input type="checkbox"/>

(a) If your organisation operates in more than ten local authority areas in England or Wales, select one of the options below. Otherwise complete part (b).

Organisation operates:

throughout London (more than ten London boroughs)	<input type="checkbox"/>
throughout England (more than ten local authority areas)	<input type="checkbox"/>
throughout Wales (more than ten local authority areas)	<input type="checkbox"/>
throughout England and Wales (more than ten local authority areas)	<input checked="" type="checkbox"/>

(b) If your organisation works in specific parts of England and Wales (or both) please specify which ones in the spaces below.

## Local authority area

1	2
3	4
5	6
7	8
9	10

(c) If the organisation's funds or resources are used in any countries outside England and Wales, please list these. We only accept the country names listed in the guidance notes. Please attach a separate sheet if you operate in more than twelve countries.

## Country

1 Scotland	2
3	4
5	6
7	8
9	10
11	12

If your organisation is administered by a corporate trustee, please complete the corporate trustee's details.

Corporate trustee name **P**


## Address

  
  
  
  
 Postcode 

## Email address

## Telephone number