

Storage Grant application (S1)

If you require additional space to answer any of the questions please use a separate Word document and submit it along with the form.

1. Project details	
Project name	
Project number	
When did the project take place? (mm/yy – mm/yy)	
Which organisation was responsible for the project?	
Was a selection strategy used to select the contents of this archive? Please name the relevant project document demonstrating this and provide a copy with the application.	
Please provide a succinct statement (no more than 100 words) on the evident significance of the project archive.	

2. Applicant details		
Name of museum/organisation		
Address of museum/organisation		
Is your museum/organisation an accredited archive repository?	Yes	No
Contact name		
Position held by contact		
Contact e-mail address		
Contact phone number		
3. Ownership and transfer of materials		
Does your organisation own the excavated material via a formal Transfer of Title?	Yes	No
If 'no' to the above, who owns the material currently and when do you expect to take ownership?		
Has the archive material been physically transferred to your organisation?	Yes	No
If 'no' to the above, when do you expect the archive material to be physically transferred to your organisation?		
If the transfer will happen in phases, please provide details.		



4. Public benefit and accessibility

Will the archiv	ive be publicly accessible ioned?					Ye	es		No	F	Partly			
If you have ar the above, ple explanation.					r' to									
Are there curre the archive meducation, reserved engagement)	ateria search	l (e.g	. exh	ibitior		Ye	es		No	P	artly			
If 'yes' or 'par provide furthe			ibove	, plea	ise									
5 Overt ve	4													
5. Grant request														
Please refer to form S1a ' Storage Grant Calculation ' before completing this section. The S1a form should be submitted as part of your application.														
Total grant ap	plied	for	£											
<u>'</u>														
6. Bank details														
Please enter your organisation's bank details below. Please note that if your application is successful we will need to request evidence of these details.														
Bank name														
Account									Sort					
number									code					



7. Signature	e and declaration
Comm	rm that I have read and understood the information relating to Heritage Protection nissions (HPC) Grants in the Historic England 'Guidance for Grants' (Can be found os://historicengland.org.uk/images-books/publications/guidance-grants-projects/).
Name	Signed
Position	Date

FOR HISTORIC ENGLAND USE ONLY

Project funding confirmed	Date	
Project funding approved	Date	

If you require an alternative accessible version of this document, please contact our Customer Services Department:

Telephone: 0370 333 0607

Email: customers@HistoricEngland.org.uk