EYBid1 May 2025

ESSEX COUNTY COUNCIL

STAGE 1 PROJECT CONCEPT STAGE

EARLY YEARS CAPITAL FUNDING APPLICATION PROCESS

Notes:

# Please refer to the **Checklist for Early Years Building Projects** prior to completing this Form. An example form is included within the Checklist for Early Years Building Projects to assist when completing this document.

1. Please complete all sections

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| --- |
| EARLY YEARS BUSINESS NAME: .....................................................................................................................................................  ADDRESS OF BUILDING TO BE ALTERED:  ...................................................................................................................................................... |
| APPLICANTS NAME, EMAIL AND MOBILE NUMBER ..................................................................................................................................................... |
| Project Description:  Please provide details of the construction/building work to be undertaken, confirm the location at the site, and how the construction/building will be carried out  Please include the occupant numbers for each new space.  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
| Name of appointed Property Consultant (if required) |
| Name, Email and Mobile number :  ……………………………………………………………………………………………………………….. |
| Please submit any annotated Site plan/sketch plan showing the location of proposed construction/building works   * site plan indicating location of actual works * existing building plan * proposed extension or new building plan * proposed internal works * an external area plan * Photo’s of exiting site   Programme of the construction/building works  Please provide a programme of start and completion dates  Approximate duration of the construction/building work on site in weeks  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
| Logistics:  Provide detail of how the construction/building works will be carried out.  Please detail if your business will remain open to children/staff during the works  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
| Quotes:  Please provide scanned pdf copies of your quotes for the construction/building works and indicate which is your preferred supplier.  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
| Approximate value of work  £ |
| Planning  Please indicate that you have reviewed the local authority planning website to confirm if is Planning Approval Required? YES/NO (Please delete)  Has Planning Approval been achieved? YES/NO (Please delete)  Planning application number (if required): |
| Building Control Approval  Please provide a statement of how you intend to achieve Local Building Control sign off.  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  Please provide a statement on how the construction/building works intends to consider accessibility for less able building users.  ………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………..  ……………………………………………………………………………………………………………….. |
| Declaration - to be completed by Applicant |
| I have read the Checklist for School Building Projects and have taken and/or will take note of its contents in relation to this project. I understand that approval of this EYBid1 application does not constitute approval to proceed with the works, and any expenditure to date is at the risk of the applicant. Please ticko |
| I understand that this Consent does not constitute technical approval of the project and should not be used for this purpose. Any technical review of the proposal by ECC is purely for the purposes of Capital Funding Approval and suitable technical expertise must be employed directly by the applicant to ensure all standards are achieved. Please ticko |
| I confirm that no works will commence on site until such time as EYBid2 Stage 2 is completed approval is granted Please ticko |
| Name: |
| Signed: |
| Position: |
| Date: |
| Please submit [this](mailto:this) EYBid1 form with your Early Years and Childcare Infrastructure Development Capital Funding 2025 Application Form to satisfy Question 2 of the evaluation criteria within this application. |