

**1. ABOUT YOUR ORGANISATION - ELIGIBILITY**

| | | |
|--|---|--------------------------|
| Name of applicant organisation: | Burghclere Down Community Centre | |
| Organisation registered address: | Berry Way, Burghclere Down, Andover Hampshire, SP10 3RZ | |
| Please answer the following questions: | | |
| | Contact | Telephone no |
| a. Who will install the device? | BDCC Trustees | ██████████ ██████████ |
| b. Who will insure the device? | BDCC | ██████████ |
| c. Who will register the device? | BDCC | ██████████ |
| d. Who will maintain the device? | BDCC Trustees | ██████████ |
| e. Who will perform weekly checks on the device? | BDCC Trustees | ██████████ |

2. EQUIPMENT (to include the defibrillator casing)

| | | |
|---|---|--|
| Equipment to be/has been purchased. | • CU Medical iPad SPR Semi-Automatic Defibrillator. Including Prep Kit, Pads, Battery purchased via aadefib.com (Quotation provided by applicant) | |
| Cost of equipment to be/has been purchased. | £895.00 excl VAT (£1074.00 incl) | |
| Date of purchase | TBC | |
| Intended Location of Defibrillator | Burghclere Down Community Centre, Berry Way, Burghclere Down Andover, SP10 3RZ | |
| Please tick to agree that once the defibrillator is "our organisation" agrees to take full ownership and responsibility for the maintenance, installation, Weekly checks, insurance, and risk assessments for it. | <input type="checkbox"/> ✓ | |

3. MAKING YOUR APPLICATION.

Please double check you have completed the form and included all required documents.

Please then return the form to:

Andover Town Council, Office 107, Incuhive Andover, Chantry House, 38 Chantry Way, Andover Hampshire, SP10 1LS.

OR

Electronic copies to: office@andovertc.co.uk

OTHER INFORMATION

Andover Town Council requires proof of defibrillator purchase within 5 working days of receipt of monies. If this is not received the money will be returned to Andover Town Council.

Please tick to indicate agreement.

✓

POLICIES OR PROCESSES TO BE READ IN CONJUNCTION WITH THIS DOCUMENT

Privacy Statement
Publication Scheme

Defibrillator Policy.
Terms of Reference for C&E Working Group

NB: Andover Town Council can only consider units that haven't been purchased in the last 3 months.