



CONSOLIDATED CHARITY OF BURTON UPON TRENT

APPLICATION FOR RELIEF IN NEED GRANT ASSISTANCE

The scheme operates to help those in financial need with assistance to purchase essential items such as:

- White goods for example cookers, fridge freezers, washing machines, tumble dryers
- Carpets, furniture, bedding
- Mobility aids
- Official school uniforms
- Dehumidifier

1. Applicants **must** live in the area of benefit:

Burton upon Trent and the parishes Anslow, Barton-under-Needwood, Branston, Brizlincote, Dunstall, Hanbury, Stretton, Rolleston-on-Dove, Tutbury, Tatenhill and Rangemore and the existing civil Parish of Outwoods including South Outwoods

2. The maximum grant awarded will be **£750** per calendar year, and no more than three individual applications will be considered in a five-year period.

3. Your application must be supported by a Support Worker, or other suitable professional, such as Social Worker, Local Councillor, Probation Officer, Tenancy Support Worker, Health Visitor or a Family Liaison Officer. (a doctor's letter will not be accepted).

All grants are awarded entirely at the discretion of the Charity's Trustees and there is no right of appeal.

ALL APPLICATIONS to include the following Supporting Documentation

- **Two months recent bank statements for ALL accounts held by ALL applicants listed, screenshots of bank statements will not be accepted.**
- **Proof of wages, three pay slips or copies of benefit/universal credit documentation for all applicants if available.**
- **A letter of support from a support worker or other suitable professional.** The letter must be on headed paper, signed by the 'supporter' and contain the following information:
 - confirmation of the applicant's current address and reason why applicant needs assistance
 - a list of the items that are needed, including confirmation that the items are required by the applicant.
- **Quotations from the attached list of recommended suppliers** (see preferred supplier list)

Data Protection Statement: it is part of the Trustees' responsibilities to ensure that grant applicants are suitably qualified under the terms of the charity's governing document. Trustees, therefore, need to investigate the personal circumstances of applicants. The personal data supplied on this form and other information relating to the application will be held on file. **Some details may be checked with relevant organisations since the charity reserves the right to investigate and verify what you write in this form**, but no details will be disclosed for any inappropriate purpose. You may have access to your personal information on request.



CONSOLIDATED CHARITY OF BURTON UPON TRENT

APPLICANT'S DETAILS

Title: _____ Surname: _____

First Name(s) _____ Previous Surname (if applicable) _____

Date of Birth: _____ Age _____

Email: _____

Telephone (Home) _____ (Mobile) _____

Marital Status: [MARRIED / CP / WIDOWED / DIVORCED / SEPARATED / SINGLE] *Please delete as appropriate

OCCUPATION _____

HOME ADDRESS _____

_____ POSTCODE _____

NATURE OF PROPERTY [OWNED / RENTED / OTHER] *(Please circle)

If not owned, please state name of landlord or explain other details.

HOW LONG HAVE YOU LIVED AT THE CURRENT ADDRESS? _____ If less than 2 years, please give previous address(es) and length of time there

HOW LONG HAVE YOU LIVED IN THE AREA OF BENEFIT (As per point 2 of the covering guidelines)

PLEASE GIVE DETAILS OF OTHER MEMBERS OF THE HOUSEHOLD AND ANY OTHER DEPENDENTS

<u>FULL NAME</u>	<u>DATE OF BIRTH</u>	<u>RELATIONSHIP TO APPLICANT</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



CONSOLIDATED CHARITY OF BURTON UPON TRENT

SECOND APPLICANT'S DETAILS

Title: _____ Surname: _____

First Name(s) _____ Previous Surname (if applicable) _____

Date of Birth: _____ Age _____ National Insurance No: _____

Email: _____

Telephone (Home) _____ (Mobile) _____

Marital Status: [MARRIED / CP / WIDOWED / DIVORCED / SEPARATED / SINGLE] *Please delete as appropriate

OCCUPATION _____

HOME ADDRESS _____

_____ POSTCODE _____

NATURE OF PROPERTY [OWNED / RENTED / OTHER] *(Please circle)

If not owned, please state name of landlord or explain other details.

HOW LONG HAVE YOU LIVED AT THE CURRENT ADDRESS? _____ If less than 2 years, please give previous address(es) and length of time there

HOW LONG HAVE YOU LIVED IN THE AREA OF BENEFIT (As per point 2 of the covering guidelines)

PLEASE GIVE DETAILS OF OTHER MEMBERS OF THE HOUSEHOLD AND ANY OTHER DEPENDENTS

<u>FULL NAME</u>	<u>DATE OF BIRTH</u>	<u>RELATIONSHIP TO APPLICANT</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HOUSEHOLD INCOME

PLEASE WORK OUT YOUR TOTAL MONTHLY INCOME
 (If your income fluctuates, please use an average worked out over the previous 3 months)

	Applicant	Second Applicant	OFFICE USE
Wages			
Universal Credit			
Working Tax Credit			
Job Seekers Allowance			
Incapacity Benefit / ESA			
Disabled Persons Tax Credit			
Child Benefit			
Child Tax Credit			
Child Support Maintenance			
Other Maintenance			
State Pension			
Other Pension			
Pension Credit			
Disability Living Allowance / PIP			
Carers Allowance / Attendance Allowance			
Income Support			
Housing Benefit			
Other Income			
TOTAL MONTHLY INCOME			

Please give full details of any **CAPITAL** you (and the second applicant) may have (including Property, Savings, Shares, etc).

£

TOTAL £ _____

HOUSEHOLD EXPENDITURE

PLEASE WORK OUT THE TOTAL MONTHLY EXPENDITURE FOR YOUR HOUSEHOLD
(If your expenditure fluctuates, please use an average worked out over the previous 3 months)

EXPENDITURE	£ MONTHLY	OFFICE USE
Rent / Mortgage Payments		
Council Tax		
Water Rates		
Gas		
Electricity		
Home Telephone / Mobile		
Home / Contents Insurance		
Pension Contributions		
Life Assurance		
TV Licence		
TV Rental / Satellite Subscription		
Car Running Costs (Petrol, Insurance, Road Tax, MOT, etc)		
Other Travel Costs		
Loan & HP Repayments		
Maintenance & Court Orders		
Food		
Clothes		
Other Expenditure – please state		
TOTAL MONTHLY EXPENDITURE		

Please give **full details** of any **DEBTS** or **LIABILITIES** all applicants may have (including Mortgages, Loans, HP, Court Orders, Fines, etc).

<u>Name of Creditor</u>	<u>Balance owing</u>
	£
_____	_____
_____	_____
_____	_____
TOTAL £ _____	



CONSOLIDATED CHARITY OF BURTON UPON TRENT

ASSISTANCE REQUIRED

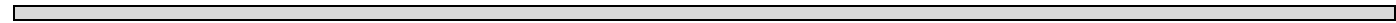
Please list the item(s) required.

Quotations must be supplied. See Guidelines for details.

Note: If the requested item is not available or out of stock a comparable item will be ordered in its place.

ITEM(S) REQUIRED - PLEASE LIST IN ORDER OF PRIORITY	
1	
2	
3	
4	
5	
6	

Please explain why you need help with the items listed above. Include any information which you feel is relevant to your application.



PLEASE SIGN

I CERTIFY THAT ALL THE INFORMATION PROVIDED ON THIS APPLICATION FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I AUTHORISE ANY REPRESENTATIVE OF THE CONSOLIDATED CHARITY OF BURTON UPON TRENT TO MAKE ANY ENQUIRIES FROM ANY THIRD PARTY FOR THE PURPOSE OF PROCESSING MY APPLICATION FOR FINANCIAL ASSISTANCE.

I ACCEPT THAT PERSONAL DATA SUPPLIED ON THIS FORM WILL BE HELD ON FILE. SOME DETAILS MAY BE CHECKED WITH RELEVANT ORGANISATIONS BUT NONE MAY BE DISCLOSED FOR ANY INAPPROPRIATE PURPOSE. I UNDERSTAND I HAVE ACCESS TO THIS INFORMATION ON REQUEST.

SIGNATURE _____ DATE _____
Applicant

SIGNATURE _____ DATE _____
Second Applicant

Tick box to confirm that the following supporting documentation is enclosed with this application.

- Two months recent bank statements for ALL accounts held by all applicants listed.
- Proof of wages, three pay slips or copies of benefit/universal credit documentation for all applicants if available.
- A letter of support from a support worker or other suitable professional, as detailed in point 4 of the application guidelines.
- Quotations from the attached list of recommended suppliers.

FAILURE TO COMPLETE THIS FORM AND PROVIDE THE ABOVE SUPPORTING DOCUMENTATION WILL DELAY YOUR APPLICATION AND MAY RESULT IN IT BEING DECLINED

Please return this form together with the supporting documentation to:

**Mr J P Southwell
Clerk to the Trustees
Consolidated Charity of Burton on Trent
1st Floor, Gibraltar House
Crown Square, First Avenue
Burton upon Trent, Staffordshire, DE14 2WE**

Alternatively, you can email your application to: clerk@consolidatedcharityburton.org.uk

For further information call us on 01283 527067

RECOMMENDED SUPPLIERS FOR RELIEF IN NEED GRANT APPLICATIONS

Electrical / Gas Appliances (Reconditioned products or basic new models only) Please note, cookers and washing machines must include installation fee within the quote.

Burton Domestics	Unit 10, Eton Park Industrial Estate, Derby Road, Burton on Trent	01283 567684	www.burtondomestics.com
Burton YMCA	5 Borough Road, Burton on Trent	01283 547133	
J2K Appliances	Unit 12, Eccleshall Business Park, Hawkins Lane, Burton on Trent	01283 569927	www.j2kappliances.co.uk

Prices include delivery, fitting and a minimum one year's guarantee.

Note: If the item is not available or out of stock a comparable item will be ordered in its place.

Carpets & Floor Coverings

Micks Carpets	Curzon Street, Burton upon Trent	01283 510086	www.mickscarpets.co.uk
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Itemised quote required from Micks Carpets detailing room, room size and price per square metre (or yard). Carpets are priced at £8.99 per square yard which includes delivery/fitting charges. Vinyl is priced at £14.99 per square yard which includes delivery/fitting charges. Please note areas under 5 square meters will have an installation charge of £35.00 added. The quote supplied is for laying of the vinyl flooring only. WE expect that the sub floor is of a good standard and free from any damage or debris etc.

Beds, Mattresses and Furniture

Burton YMCA	5 Borough Road, Burton on Trent	01283 547133	
Burton Beds & Furniture	243 Horninglow Road, Burton on Trent	07708 918084	

School Uniforms

My Uniform Ltd	82 Wellington Road Burton on Trent, DE14 2DS	01283 619224	www.myuniformltd.com
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Grants awarded for official/branded school wear only (non-branded items are not available under this scheme).