
STATUTORY INSTRUMENTS

1994 No. 565

HOUSING, ENGLAND AND WALES

**The Housing Renovation etc. Grants (Prescribed
Forms and Particulars) Regulations 1994**

<i>Made</i>	- - - -	<i>5th March 1994</i>
<i>Laid before Parliament</i>		<i>14th March 1994</i>
<i>Coming into force</i>	- -	<i>4th April 1994</i>

The Secretary of State for the Environment, as respects England, and the Secretary of State for Wales, as respects Wales, in exercise of the powers conferred on them by sections 102(2) and (4), 137(2), 138(1)(1) and 190(1) of the Local Government and Housing Act 1989⁽²⁾ and of all other powers enabling them in that behalf, hereby make the following Regulations:—

Citation and commencement

1. These Regulations may be cited as the Housing Renovation etc. Grants (Prescribed Forms and Particulars) Regulations 1994 and shall come into force on 4th April 1994.

Interpretation

2.—(1) In these Regulations “the Act” means the Local Government and Housing Act 1989.

(2) Any reference in these Regulations to a numbered form is a reference to the form bearing that number in Schedule 1 to these Regulations, or to a form substantially to the same effect.

Forms of Application for Grant

3. The forms of application for a grant prescribed under section 102(4) of the Act shall be as follows—

- (1) the form of application for a renovation grant shall be Form 1;
- (2) the form of application for a disabled facilities grant shall be Form 2;
- (3) the form of application for a common parts grant shall be Form 3;
- (4) the form of application for an HMO grant shall be Form 4.

(1) See the definition of “prescribed”.
(2) 1989 c. 42.

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Particulars for Application for Grant

4. The prescribed particulars to be contained in any application for a grant the form of which is prescribed by regulation 3 above are the particulars required by that form (other than those required by section 102(2) of the Act).

Revocation

5. The Regulations listed in Schedule 2 to these Regulations are hereby revoked.

Application of Regulations

6. These Regulations shall not have effect in relation to applications for a grant made before 4th April 1994.

Signed by authority of the Secretary of State

4th March 1994

G.S.K. Young
Minister of State,
Department of the Environment

5th March 1994

John Redwood
Secretary of State for Wales

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SCHEDULE 1

Regulation 3

FORM 1 APPLICATION FOR RENOVATION GRANT

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FORM 1
APPLICATION FOR RENOVATION GRANT

(Name and address of Council)

THIS IS THE APPLICATION FORM TO USE IF YOU WANT TO APPLY FOR A RENOVATION GRANT. DIFFERENT FORMS SHOULD BE USED IF APPLYING FOR A DISABLED FACILITIES GRANT (FORM 2), COMMON PARTS GRANT (FORM 3) OR AN HMO GRANT (FORM 4). WHEN YOU HAVE COMPLETED THIS FORM, PLEASE SEND IT TO THE COUNCIL.

IF YOU ARE UNCERTAIN HOW TO ANSWER ANY OF THESE QUESTIONS, PLEASE CONTACT:

(Name, address and telephone number of contact in the Council)

IMPORTANT

PLEASE READ THE FOLLOWING NOTES BEFORE STARTING THIS APPLICATION FORM

A. This form is in four parts:-

Part 1 – asks for information about the property and the works to be carried out.

Part 2 – asks for information about your interest in the property. It is in two sections, and you are only required to complete one section, depending on whether you are (or will be) an owner-occupier, landlord or tenant.

Part 3 – contains two sections and you are only required to complete one of these. Section A deals with applications from owner-occupiers and tenants, and asks for information about your household and financial resources, and each person who is required to complete this section must sign a declaration about the information they give. Section B asks for financial information from landlords.

Part 4 – requires you to provide various enclosures with the application. You are also required to sign a declaration about the information you give in the application.

B. Your application will NOT be valid unless you complete all the relevant parts of this form and enclose the necessary documents required in Part 4.

C. All appearances of “you” and “your” in this application form – except in Section A of Part 3 -- are references to the grant applicant.

D. The references to notes in the forms are to the numbered notes at the end of the form.

E. Renovation grant is not payable if the property where the works are to be carried out is less than 10 years old or was converted less than 10 years ago.

F. If you are applying as an owner-occupier or tenant, the property which is the subject of the grant application must be or be intended to be the only or main residence of either you or a member of your family. No grant is available for second or holiday homes.

G. If you are applying as a tenant, you may only apply for a renovation grant if you are required under the terms of your tenancy to carry out the works for which a grant is sought.

H. You cannot make an application for grant as a tenant if you are proposing to buy the freehold of the property or if you already have, or are proposing to take, a tenancy of it with at least 5 years still to run. In these circumstances you would have to make an owner's application (either as an owner-occupier or landlord).

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J. If you have a mortgage you may find that the terms require your mortgagee's consent to apply for a grant (or carry out works). Make sure that you have obtained any necessary permission before submitting an application.

K. A grant will not normally be paid if you, or anyone else acting on your behalf, begin the works before you receive written approval of this application. Exceptions may be made where the works are required to comply with certain notices (e.g. those served under sections 189 or 190 of the Housing Act 1985). A grant will usually be refused if the works are completed before the application has been approved. Planning permission or building regulations approval is not the same as grant approval.

ADDRESSES FOR CORRESPONDENCE

To be completed by all grant applicants

Your name:

Address for correspondence:

Note 1

Your telephone number: (home)
(work)

If someone else (e.g. a friend or an organisation) is handling this application on your behalf, please give the name, address and telephone number of the person to be contacted about this application.

Name:

Address:

Telephone number:

Please give the name, address and telephone number of the person who may be contacted to gain access to the property (e.g. to carry out an inspection).

Name:

Address:

Telephone number:

PART 1: INFORMATION ABOUT THE PROPERTY AND THE WORKS TO BE CARRIED OUT

Please answer each question in turn unless directed elsewhere (e.g. "Go to 1.7"). Please read the notes indicated on the right hand side before answering the questions to which they relate.

1.1 Address of the property at which the works are to be carried out:

Note 2

1.2 Was the property—

(a) built more than 10 years ago?

Yes

or

No

Note 3

(b) provided by conversion more than 10 years ago?

Yes

No

Note 3

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- 1.3 Have you made any previous application for grant on this property? Yes No (Go to 1.5)
- 1.4 Please give the date of your application and Council reference (if known): **Note 4**
 Date: Reference:
- 1.5 Do you know of any previous application for grant made by another person on this property? Yes No (Go to 1.7)
- 1.6 Please give details (if known): **Note 5**
- 1.7 Have you or has anyone else been served with a notice under sections 189 or 190 of the Housing Act 1985? Yes No (Go to 1.9)
- 1.8 Please give details, including the date the notice was served:
- 1.9 Will the works to be carried out involve converting the property to provide one or more dwellings? Yes (Go to 1.11) No (Go to 1.10)
- 1.10 Will the works to be carried out involve improving and/or repairing an existing dwelling? Yes (Go to 1.13) No **Note 6**
- 1.11 Describe the conversion to be carried out: **Note 7**
- 1.12 How many dwellings will be provided by the conversion? (Go to 1.14)
- 1.13 Describe the improvement and/or repair work to be carried out: **Note 7**
- 1.14 Is the property currently vacant? Yes No
- 1.15 Have you applied for planning permission? Yes **Note 8** No (Go to 1.18)
- 1.16 Please give the date of your application:
- 1.17 What was the outcome of your application? Tick box
 Granted
 Refused
 No decision yet
- 1.18 Have you applied for building regulations approval? Yes **Note 8** No (Go to 1.21)
- 1.19 Please give the date of your application:
- 1.20 What was the outcome of your application? Tick box
 Granted
 Refused
 No decision yet

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- 1.21 Will you or a member of your family carry out the works? Yes **Note 9**
No
- 1.22 Please give details of any services or charges which you wish to have considered for grant: **Note 10**
- 1.23 Do you wish the grant to be paid to someone other than yourself (e.g. your builder)? Yes
No (Go to Part 2)
- 1.24 Please give their name and address:

NOW GO TO PART 2

PART 2: INFORMATION ABOUT YOUR INTEREST IN THE PROPERTY AND HOW THE PROPERTY IS OCCUPIED

- 2.1 Are you applying as a charity, or is the application made in respect of glebe land or the residence house of an ecclesiastical benefice? **Note 11**
(Go to Section B of Part 3)
Yes
No (Go to 2.2)
- 2.2 Which type of certificate of future occupation are you providing with your application? **Tick box**
- (a) an owner-occupation certificate **Notes 12 and 13**
(Go to Section A)
- (b) a certificate of intended letting **Notes 12 and 14**
(Go to Section A)
- (c) a tenant's certificate **Note 15**
(Go to Section B)

SECTION A

Please answer each question in turn unless directed elsewhere.

- 2.3 Do you, or will you, (alone or jointly with others) own the freehold of the property or have a tenancy of the property with at least 5 years still to run? Yes (Go to 2.4)
No **Note 16**
- 2.4 Do you already have this interest? Yes
No (Go to 2.6)
- 2.5 Is this interest held jointly with other people? Yes (Go to 2.9)
No (Go to Part 3)
- 2.6 Do you intend to acquire this interest? Yes
No **Note 17**
- 2.7 When do you expect this to happen? (give approximate date): **Note 18**
- 2.8 Will the interest be held jointly with other people? Yes (Go to 2.9)
No (Go to Part 3)
- 2.9 Please give the name(s) and (if different from your own) address(es) of those people holding or intending to hold a joint interest, who are residing or intending to reside in the property:

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NOW GO TO PART 3

SECTION B

Please answer each question in turn unless directed elsewhere.

- 2.10 Do you, or will you (alone or jointly with others), own the freehold of the property or have a tenancy of the property with at least 5 years still to run? Yes No **Note 19**
- 2.11 Are you obliged, by the terms of your tenancy, to carry out the works for which you are seeking a grant? Yes No **Note 20**
- 2.12 Please give details of your obligation: **Note 21**
- 2.13 Do you have a joint tenancy? Yes No (Go to 2.15)
- 2.14 Give the name(s) and (if different from your own) address(es) of any joint tenants residing or intending to reside in the property:
- 2.15 Are you a tenant of the local authority? Yes No **Note 22**
- 2.16 Give the name, address and telephone number of the landlord or the landlord's agent (indicate which):

NOW GO TO PART 3

PART 3: FINANCIAL INFORMATION

- 3.1 Are you providing a certificate of intended letting with your application? Yes No (Go to Section B)
- 3.2 Are you providing an owner-occupation certificate or tenant's certificate with your application? Yes No **Note 23**
- 3.3 Are you, your partner and everyone else you may have mentioned in questions 2.9 or 2.14 (and their partners) all on income support? Yes No **Notes 24 and 25** (Go to Section A)

SECTION A: TEST OF RESOURCES FOR OWNER-OCCUPIERS AND TENANTS

Please answer each question in turn unless directed elsewhere. This section is to be completed in respect of yourself and your family. Duplicates of this section must also be completed in respect of each person or couple mentioned in question 2.9 (in the case of owner-occupiers) or 2.14 (in the case of tenants). References to "you" or "your" in this section (only) should therefore be treated as references to you and, if appropriate, to that person or persons.

YOU AND YOUR FAMILY

- 3.4 Please give your full name: Mr/Mrs/Miss/Ms
- 3.5 Please give your date of birth: / / Age:

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3.6 Have you a partner living with you? Yes **Note 25**
 No (Go to 3.8)

3.7 Please give the following details in respect of your partner: **Note 26**

Partner's full name: Mr/Mrs/Miss/Ms.....

Date of birth: / / Age:

3.8 Are you or is your partner registered as blind?
 You Yes No
 Your partner Yes No

3.9 Have you or has your partner formerly been registered as blind, but ceased to be so registered because of regaining eyesight?
 You Yes (if yes for either, No (if no for both,
 Your partner Yes go to 3.10) No go to 3.11)

3.10 Please give the date on which the registration ceased:
 You
 Your partner

3.11 Are you, or is your partner, unable to work because of sickness, and have you or has your partner been so for at least the last 28 weeks? **Note 27**
 You Yes (if yes for either, No (if no for both,
 Your partner Yes go to 3.12) No go to 3.13)

3.12 Please give details including dates:

3.13 Are you or is your partner provided with an invalid carriage or other vehicle, or receiving an allowance in respect of such a vehicle (including via the mobility scheme)?
 You Yes (if yes for either, No (if no for both,
 Your partner Yes go to 3.14) No go to 3.15)

3.14 Please give details:

3.15 Do you or your partner receive any of the following allowances or benefits in respect of illness or disability?

		Yes	No
Attendance allowance	You	<input type="checkbox"/>	<input type="checkbox"/>
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>
Disability living allowance	You	<input type="checkbox"/>	<input type="checkbox"/>
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>
Disability working allowance	You	<input type="checkbox"/>	<input type="checkbox"/>
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>

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Invalid care allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 28
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Invalidity pension	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 29
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Mobility supplement	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Severe disablement allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	

3.16 If you receive, or your partner receives, the care component of disability living allowance (whether or not the allowance also consists of the mobility component), is the care component awarded at the highest, middle or lowest rate?

	Highest	Middle	Lowest
You	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.17 If you do not, or your partner does not, receive attendance allowance or the care component of disability living allowance at the highest or middle rate, is this because you are or your partner is undergoing treatment?

	Yes	No
You	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>

3.18 If you answered "No" to the part of question 3.15 which asks about invalid care allowance, have you or has your partner received that allowance at any time in the last 8 weeks?

	Yes	No
You	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>

3.19 Does anyone receive an invalid care allowance for caring for you or your partner?

Yes	<input type="checkbox"/>	
No	<input type="checkbox"/>	(Go to 3.21)

3.20 Please give details, including the name of the person who receives the allowance and whether it is paid for caring for you or your partner:

.....

3.21 Do you or your partner have any dependent children, under the age of 19, living with you?

Yes	<input type="checkbox"/>	Note 30
No	<input type="checkbox"/>	(Go to 3.31)

3.22 Please give the details requested below, and in questions 3.23 to 3.30, in respect of each of these children:

Full Name	Date of Birth	What the child does (e.g. school, student, work etc.)	Please state if the child is registered as blind, or if the child was registered but has ceased to be so (giving the date on which registration ceased), or receives attendance or disability living allowance or mobility supplement.
.....
.....
.....

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READ NOTE 31 BEFORE PROCEEDING TO QUESTION 3.23

3.23 Does any child named in question 3.22 above work 16 hours per week or more? Yes Notes 32 and 33
No (Go to 3.25)

3.24 Please give details:

Name	Type of work	Gross pay	How often paid
.....	£.....
.....	£.....

3.25 Does any child named in question 3.22 above have any other income whatsoever? Yes
No (Go to 3.27)

3.26 Please give details:

Notes 34 and 35

Name	Type of income	How much	How often paid
.....	£.....
.....	£.....

3.27 Does any child named in question 3.22 above have any savings or other investments? Yes Note 36
No (Go to 3.29)

3.28 Please give details, including current value(s) where known:

Name: Type: Amount: £.....
Name: Type: Amount: £.....

3.29 Does any child named in question 3.22 above own any land, property, business or have any other capital whatsoever? Yes
No (Go to 3.31)

3.30 Please give details, including current value(s) where known:

Note 37

Name: Details:.....
Name: Details:.....

3.31 Is there anyone aged 18 or over who lives with you, apart from your partner or any dependent children? Yes Note 38
No

3.32 Please give details:

Name: Relationship to you:.....
Name: Relationship to you:.....

3.33 Does any person named in question 3.32 above receive attendance allowance or the care component of disability living allowance at the highest or middle rate? Yes
No

3.34 Please give details, including the name of the person who receives the allowance:

.....
.....

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YOUR INCOME

Notes 39 and 40

3.35 Are you, or is your partner, on income support? (Go to the Declaration at the end of this section)

Yes

No (Go to 3.36)

3.36 Are you, or is your partner, currently in paid employment? (Go to 3.40)

Yes

No

3.37 Please give the following details for each: **Note 41**

	You	Your partner	
Name and address of employer:	
	
	
Occupation/job title:	
Gross pay:	£.....	£.....	Note 42
How often paid:	
Income tax paid:	£.....	£.....	
National Insurance contributions:	£.....	£.....	
Occupational or private pension plan payments:	£.....	£.....	
Average hours worked per week (if less than 16 hours per week):	Note 43

3.38 Do you or does your partner have any other paid employment (e.g. second, part-time or casual job(s))? (Go to 3.40)

Yes

No

3.39 Please give the following details for each job: **Note 41**

	You	Your partner	
Name and address of employer:	
	
	
Occupation/job title:	
Gross pay:	£.....	£.....	Note 42
How often paid:	
Income tax paid:	£.....	£.....	
National Insurance contributions:	£.....	£.....	
Occupational or private pension plan payments:	£.....	£.....	
Average hours worked per week (if less than 16 hours per week):	Note 43

3.40 Are you or is your partner self-employed? (Go to 3.42)

Yes

No

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3.41 Please give details of self-employment: **Note 44**

3.42 Do you or your partner receive a pension of any kind? Yes
 No (Go to 3.44)

3.43 Please give details of the pension(s) received by you or your partner: **Notes 41 and 45**

	You		Your partner	
	Amount	How often paid	Amount	How often paid
Occupational pension	£.....	£.....
Retirement pension	£.....	£.....
Widow's pension	£.....	£.....
War widow's pension	£.....	£.....
War disablement pension	£.....	£.....
Any other pension(s)	£.....	£.....
	£.....	£.....

3.44 Do you or your partner receive any state benefit(s)? Yes
 No (Go to 3.46)

3.45 Please give details of the benefits received by you or your partner, including any of the following: **Notes 41 and 46**

	You		Your partner	
	Amount	How often paid	Amount	How often paid
Child benefit	£.....	£.....
Disability working allowance	£.....	£.....
Family credit	£.....	£.....
Invalid care allowance	£.....	£.....
Invalidity benefit	£.....	£.....
One parent benefit	£.....	£.....
Severe disablement allowance	£.....	£.....
Sickness benefit	£.....	£.....
Statutory maternity pay	£.....	£.....
Statutory sick pay	£.....	£.....
Unemployment benefit	£.....	£.....
Any other benefit(s)	£.....	£.....

3.46 Do you or your partner receive any other income whatsoever? Yes
 No (Go to 3.48)

3.47 Please give details of this income, including any of the following: **Notes 41 and 47**

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	You		Your partner	
	Amount	How often paid	Amount	How often paid
Adoption allowance	£.....	£.....
Annuities	£.....	£.....
Charitable income and voluntary payments	£.....	£.....
Please give details of what the payments are intended to cover (e.g. heating, meals, etc.).				
Government training allowance	£.....	£.....
Income from tenants, sub-tenants, or persons to whom board and lodging accommodation is provided	£.....	£.....
Please give details of the nature of the letting, and what the payments are intended to cover (e.g. heating, meals, etc.).				
Maintenance from former partner	£.....	£.....
Other scholarships or bursaries etc.	£.....	£.....
Parent's or partner's contribution to student grant	£.....	£.....
Student grant	£.....	£.....
Student loan	£.....	£.....
YIS	£.....	£.....
Any other income	£.....	£.....
	£.....	£.....

YOUR SAVINGS, INVESTMENT AND OTHER CAPITAL

Note 48

3.48 Do you or your partner have any cash, savings or other investments? Yes No (Go to 3.50)

3.49 Please give details of savings or other investments, including any of the following: **Notes 49 and 50**

	You	Your partner
Bank current account	£.....	£.....
Bank deposit account	£.....	£.....
Bank other account(s)	£.....	£.....
Building society account(s)	£.....	£.....
	£.....	£.....
Cash savings	£.....	£.....
	£.....	£.....
National Savings Certificates	Issue No.	Issue No.
	Date	Date
	Number held	Number held

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Post Office investment account	£.....	£.....
Post Office ordinary account	£.....	£.....
Premium Bonds	£.....	£.....
Stocks, shares and unit trusts etc.	Details Current value (if known) £	Details Current value (if known) £
Any other investments	Details Current value (if known) £	Details Current value (if known) £

3.50 Please give details of any one-off payments received by you or your partner over the past 12 months, including the date(s) of such payment(s) where known:

Note 51

.....

3.51 Do you or your partner own any land, property, business, or have any other capital whatsoever?

Yes
 No

Notes 52 and 53
 (Go to 3.53)

3.52 Please give details of capital, including current value(s) where known:

.....

YOUR OUTGOINGS

3.53 Do you or your partner make a contribution in respect of a student grant for a son, daughter or partner?

Yes
 No

(Go to the **Declaration** at the end of this section)

3.54 Please give details of contributions:

.....

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this section is correct.

Signature: Date:

AUTHORISATION

(For persons receiving certain income related benefits)

(a) If you receive income support it may be possible for the Council to process your application more quickly if you give permission for your local Department of Social Security office to confirm this fact. If you wish to do this, please complete the authorisation below. If not, go to Part 4.

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I authorise the Department of Social Security to confirm on request by the Council that I now receive income support.

Name:

DSS reference number (case paper or National Insurance number), if known:
.....

Signature: Date:

(b) If you receive housing benefit (HB), council tax benefit (CTB) or community charge benefit (CCB), but not income support, it may be possible for the Council to process your application more quickly if you give permission for them to refer to your HB, CTB or CCB records. They can only do this with your consent. If you are content for the Council to refer to your existing HB, CTB or CCB records, please sign the authorisation below.

For the purpose of this application, I give my consent to the Council to refer to information provided by me for the purposes of my application(s) for housing benefit, council tax benefit and/or community charge benefit.

Name:

HB, CTB or CCB reference (if known):

Signature: Date:

NOW GO TO PART 4

SECTION B: FINANCIAL INFORMATION REQUIRED FROM LANDLORDS AND CHARITIES, AND IN RESPECT OF ECCLESIASTICAL PROPERTY

Please answer each question in turn unless directed elsewhere.

3.55 Is the application made in respect of the residence house of an ecclesiastical benefice? Yes No (Go to 3.59)

3.56 Please give details of any financial resources available to you: **Note 54**

3.57 Please give details and supply any other information as to your circumstances which may be relevant to your application:

3.58 Is the residence house currently let? Yes (Go to 3.68) No (Go to Part 4)

3.59 Are you applying as a charity, or is the application in respect of glebe land? Yes **Note 11** No (Go to 3.67)

3.60 Are you under any obligation, or is it your practice, to let dwellings at a rent which is less than a market rent? Yes (Go to 3.61) No (Go to 3.62)

3.61 Please give details:

3.62 Are any financial resources available to you in addition to the rent from the dwelling? Yes (Go to 3.63) No (Go to 3.64)

3.63 Please give details: **Note 55**

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- 3.64 Are you under any obligation, or is it your practice, to dispose of properties improved or provided by conversion by you within a period of five years of carrying out those works? Yes (Go to 3.65)
No (Go to 3.66)

3.65 Please give details:

3.66 Please supply any other relevant information as to your circumstances: **Note 56**

- 3.67 Is the dwelling currently let or subject to a statutory tenancy? Yes (Go to 3.68)
No (Go to Part 4)

3.68 Please indicate the type of tenancy or occupancy. **Note 57**

- Is it— Tick box
- (a) an assured tenancy?
 - (b) an assured shorthold tenancy?
 - (c) an assured agricultural occupancy which is a tenancy?
 - (d) a secure tenancy?
 - (e) a housing association tenancy under Part VI of the Rent Act 1977?
 - (f) a protected or statutory tenancy under the Rent Act 1977?
 - (g) a protected occupancy or statutory tenancy under the Rent (Agriculture) Act 1976?
 - (h) other (give details)

3.69 Date current rent or licence fee set:

3.70 Current rent and rental period: £ per

3.71 If the tenancy/occupancy is for a fixed term, when does this term expire?
.....

- 3.72 Does the rent or licence fee include any of the following: Tick box
- (a) water charges
 - (b) board
 - (c) furniture
 - (d) other services (give details)

3.73 Please give details about your tenancy or occupancy which may be relevant to your application (including any terms of your tenancy or occupancy): **Note 58**

NOW GO TO PART 4

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PART 4

Enclosures	Tick as enclosed	
A. Two estimates from different contractors of the cost of carrying out the works (unless otherwise instructed by the Council).	<input type="checkbox"/>	Note 59
B. Particulars of any preliminary or ancillary services and charges.	<input type="checkbox"/>	Note 60
C. A certificate as to future occupation for each dwelling to be improved, repaired or provided:		
(a) An owner-occupation certificate	<input type="checkbox"/>	
(b) A certificate of intended letting	<input type="checkbox"/>	
(c) A tenant's certificate, together with a certificate of intended letting from your landlord	<input type="checkbox"/>	

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this application is correct.

Signature: Date:

NOTES

1. If the applicant is a company or similar body, give the official (registered) address.
2. The questions in the remainder of this form relate to the property mentioned here.
3. If the property was built or was provided by conversion less than 10 years ago, it is not eligible for renovation grant.
4. If you have made more than one previous application, give details of all of them and of any contribution of which you have been notified under a group repair scheme. Previous grant approvals may affect the works for which a grant may be given, and also the amount of grant payable.
5. If you are aware of more than one previous grant application, give details of all of them and of any contribution of which you have been notified under a group repair scheme, if known. Previous grant approvals may affect the works for which a discretionary grant may be given.
6. If you have answered "No" to both questions 1.9 and 1.10 you should not be applying for a renovation grant. Please consider your answers. If you cannot answer "Yes" to one of these questions, do not proceed any further with this application.
7. Give as full a description as you can of the proposed works. It will help you to supply plans and in the case of works of improvement or conversion these should be of the property before and after the works have been carried out.
8. Planning permission or building regulations approval may or may not be required. If you are not sure whether permission or approval is required, contact the relevant department of the Council. Where permission or approval has already been obtained, please enclose a copy with your application.
9. If you carry out the works yourself, or if they are carried out by a member of your family, you may be unable to give an invoice, demand or receipt for the works which would be acceptable to the Council for the purpose of payment of a grant. Please clarify this point with the Council.

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10. Examples of preliminary or ancillary services and charges which may be included in a grant application are: technical and structural surveys; design and preparation of plans and drawings and preparation of schedules of works; obtaining of estimates; applications for building regulations approval and planning permission; supervision of the works; disconnection and reconnection of electricity, gas, water and drainage utilities made necessary by the works (but not charges arising from non-payment of bills); advice on contracts and on financing the cost of the works, including such services given by home improvement agencies. The Council can give full details of what charges and services would be eligible.

11. "Charity" does not include registered housing associations for grant purposes.

12. Having an "owner's interest" (see notes 13 and 15 below) means owning the freehold of the property, or having a tenancy of it with at least 5 years still to run at the date of the application, whether alone or jointly with others.

13. An owner-occupation certificate certifies that:

- the applicant has, or proposes to acquire, an owner's interest in the dwelling or building
- and the applicant, or a member of his or her family, intends to live in the dwelling or (as the case may be) a flat in the building as the applicant's or that person's only or main residence for at least twelve months beginning on the date certified by the Council as the date on which the grant-aided works are completed to their satisfaction.

14. A certificate of intended letting certifies that the applicant (or landlord in the case of a tenant's application):

- has, or proposes to acquire, an owner's interest in the dwelling or building
- and intends to, or already has, let the dwelling or (as the case may be) one or more flats in the building as a residence on a tenancy (which is not a long tenancy) to someone other than a member of his or her family for a period of at least five years beginning on the date certified by the Council as the date on which the grant-aided works are completed to their satisfaction.

15. A tenant's certificate certifies that:

- the applicant is a tenant of the dwelling and
- the applicant is required by the terms of the tenancy to carry out the works for which grant is sought and
- the applicant, or a member of his or her family, intends to live in the dwelling as the applicant's or that person's only or main residence.

A tenant's application must normally be accompanied by a certificate of intended letting (see Note 14) provided by the landlord, but the Council may waive this requirement in the circumstances of a particular case.

16. If you have answered "No" to question 2.3 you should not be making an owner's application. Please reconsider your answer. If you cannot answer "Yes" to this question, and you are unable to apply as a tenant (Section B), do not proceed any further with this application.

17. If you have answered "No" to both questions 2.4 and 2.6, you should not be making an owner's application. Please reconsider your answers. If you cannot answer "Yes" to one of these questions, and you are unable to apply as a tenant (Section B), do not proceed any further with this application.

18. If you have exchanged contracts on a purchase give the date that the purchase is to be completed. The Council cannot approve this grant application until you actually have the required interest.

19. If you own or intend to buy the freehold of the property, or if you have or are proposing to take a tenancy with at least 5 years of the term still to run, you cannot make a tenant's application. You should instead consider making an owner's application. (Section A of Part 2).

20. If you have answered "No" to question 2.11, then you are not eligible to make a tenant's application for a renovation grant – see Note G of the introduction to this form.

21. Please enclose a copy of the relevant part(s) with your application or state what has been agreed between you and your landlord.

22. If you have answered "Yes" to question 2.15, you are unlikely to be under an obligation to carry out works to your property, and would not therefore be eligible to apply for a renovation grant. Please clarify this point with the Council.

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23. You must provide one of the certificates mentioned in questions 3.1 and 3.2 (see notes 13 to 15 above), unless you are a charity or the application is in respect of glebe land or the residence house of an ecclesiastical benefice. If this is the case, go to Section B of Part 3. Otherwise, do not proceed any further with this application.

24. If you have answered "Yes" to question 3.3 you do not need to answer the questions in Section A of Part 3 (the test of resources). It may help the Council to process your application more quickly if each person who is on income support completes **authorisation** (a) at the end of that section. However, you are under no obligation to do this, and may instead go straight to Part 4 if you wish.

25. A partner is someone of the opposite sex who lives with you as husband or wife whether you are married or not. You should answer "No" to question 3.6 if such a person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

26. If you have more than one partner, and you are married polygamously under the law of a country which permits such marriages, you should give the details requested in respect of each partner living with you, and answer questions 3.7 to 3.54 in respect of each of them. You should also ensure that your answers to questions 3.21 to 3.30 cover all children and young persons for whom you or any of your partners are responsible and who normally live with you.

27. Even if you or your partner have been capable of work in recent weeks, you may still qualify for the "disability premium" if you or your partner have a long record of incapacity. If you think this applies to you, you should still answer "No" to this question, but give full details under question 3.12.

28. Answer "Yes" to this question if you or your partner would be entitled to invalid care allowance but for an overlapping benefit (i.e. injury benefit, unemployability supplement, industrial death benefit, war pensions death benefit, and training allowance) or you or your partner receive a concessionary payment by way of compensation for the non-payment of invalid care allowance.

29. Answer "Yes" to this question if you or your partner no longer receive this pension because of payment of a retirement pension.

30. A dependent child or young person is someone:

- who is under the age of 19;
- for whom you or your partner are responsible;
- in respect of whom you or your partner receive child benefit, or who is treated as a child for child benefit purposes; and
- who normally lives with you.

You should not include any young person who is on income support. You should answer "No" if a child or young person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that child or young person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

31. If you or your partner are on income support, you need not answer questions 3.23 to 3.26.

32. Do not include any who are under 16 or who are still in full time education.

33. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the child who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

34. You should include benefits, charitable and voluntary payments, and maintenance payments.

35. You do not need to include attendance allowance, disability living allowance or mobility supplement.

36. You should include any of the following:

- cash savings;
- money in bank, building society or Post Office accounts;
- National Savings Certificates and Premium Bonds;
- stocks, shares and unit trusts.

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37. You should include details of any capital payable in instalments, including in particular the total amount of any outstanding instalment or instalments.

38. For this purpose, a person lives with you if they share with you a room or rooms other than a bathroom, lavatory or communal area e.g. hall; but not if you pay separately for your accommodation to a landlord.

39. The Council may ask you to provide evidence of earnings covering the last 52 weeks in respect of any paid employment, together with details of any private pension plan payments made in the same period.

40. The Council may ask you to provide evidence of all other income received in the last 52 weeks.

41. If you have a partner and you are paid jointly, as a couple, enter the details in one or other column (it does not matter which) but not both.

42. Gross pay should include bonus or commission, overtime, holiday pay, sick pay or maternity pay.

43. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the person who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

44. Please supply copies of the latest accounts which give details of your self-employment. Please include details of any pension plan or retirement annuity payments, income tax and national insurance contributions paid.

45. Give the net amount if your pension is taxed.

46. You do not need to include any of the following:

- attendance allowance;
- community charge benefit;
- council tax benefit;
- disability living allowance;
- guardian's allowance;
- housing benefit;
- income support (see questions 3.3 and 3.35);
- payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;
- payments from the Fund i.e. money made available by the Secretary of State under a scheme set up on 24th April 1992 or, in Scotland, on 10th April 1992;
- payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
- payments under the "business on own account" scheme, the "personal reader service" or the "fares to work" scheme;
- social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other benefits and allowances may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

47. You do not need to include any of the following:

- anything listed in note 46;
- boarding-out or fostering payments made by a local authority, health authority or voluntary organisation;
- job start allowance;
- "Part III" payments i.e. payments made by a local authority under section 17 or 21 of the Children Act 1989 in respect of children and young people;
- payments made to you as a holder of the Victoria Cross or George Cross.

Certain other payments may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

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48. The Council may ask you to provide evidence of all savings, investments and other capital.
49. If you have a partner and hold any savings, investments or other capital jointly, enter the details in one or other column (it does not matter which) but not both.
50. If you hold any capital jointly with people other than your partner, please include the full amount of that capital (where known) and state how many others have a share in it.
51. You do not need to include any of the following:
- community charge benefit;
 - council tax benefit;
 - housing benefit, or housing benefit transitional payments;
 - "Part III" payments (see note 47);
 - payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;
 - payments from the Fund (see note 46);
 - payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
 - payments under the "business on own account" scheme, the "personal reader service" or the "fares to work" scheme;
 - "start-up" payments to homeworkers assisted under the Blind Homeworkers' Scheme;
 - social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other kinds of savings and capital payments may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

52. You should include second homes, holiday homes and any other property, including property abroad.
53. You do not need to include any of the following:
- your own home;
 - the property which is the subject of this application;
any property occupied by an elderly (i.e. aged 60 or over) or incapacitated relative of yours, or of a member of your family, as his or her only or main residence. "Relative" means any of the following: parents, parents-in-law, step-parents, sons, daughters, sons and daughters in-law, stepsons and daughters, brothers and sisters, grandparents, grandchildren, uncles and aunts, nephews and nieces;
 - if you are self-employed, the assets of your business.

Certain other capital payments may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a property or other capital falls into one of these categories you should include it and provide full details so that the Council can decide whether or not it can be disregarded.

54. Details given may include information about resources made available by the Diocesan Board of Finance, for example an extract from the annual budget of the Board. If you are not making this application as a representative of the Board, please give the address of the Board.

55. You should enclose a recent statement of accounts or annual report if available. In the case of glebe land, the Diocesan Board of Finance may provide details including an extract from the annual budget if appropriate.

56. A summary of a charity's trust deed or similar document should be provided in addition to any other information. In the case of glebe land, please indicate if the property or part of the property is currently occupied rent free by a licensed minister or lay worker.

57. If you are not sure of the type of tenancy or occupancy (for example whether it is an assured tenancy, protected tenancy or statutory tenancy), you should check this with the Council or with your own legal advisers, solicitor, the Citizens Advice Bureau or a legal advice centre.

58. This is needed to make a decision about notional rent. Examples are repairs for which you are responsible, any improvements you have carried out for which you are not responsible under the terms

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of your tenancy, or any disrepair or defect which may be attributable to your failure to comply with the terms of your tenancy.

59. The Council will normally ask for two estimates of the costs of works from different contractors: but they may require more or fewer than two estimates in any particular case. (See also note 7 above). These estimates should normally be itemised.

60. The particulars of any preliminary or ancillary services and charges are for the services and charges identified in question 1.22 - see note 10 above. Please include estimates.

FORM 2 APPLICATION FOR DISABLED FACILITIES GRANT

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FORM 2

APPLICATION FOR DISABLED FACILITIES GRANT

(Name and address of Council)

THIS IS THE APPLICATION FORM TO USE IF YOU WANT TO APPLY FOR A DISABLED FACILITIES GRANT. DIFFERENT FORMS SHOULD BE USED IF APPLYING FOR A RENOVATION GRANT (FORM 1), COMMON PARTS GRANT (FORM 3) OR AN HMO GRANT (FORM 4). WHEN YOU HAVE COMPLETED THIS FORM, PLEASE SEND IT TO THE COUNCIL.

IF YOU ARE UNCERTAIN HOW TO ANSWER ANY OF THE QUESTIONS, PLEASE CONTACT:

(Name, address and telephone number of contact in the Council)

IMPORTANT

PLEASE READ THE FOLLOWING NOTES BEFORE STARTING THIS APPLICATION FORM

A. This form is in four parts:-

Part 1 – asks for information about the property and about the works to be carried out.

Part 2 – asks for information about your interest in the property. It contains two sections, and you are only required to complete one section, depending on whether you are (or will be) an owner-occupier, landlord or tenant.

Part 3 – contains two sections, and you are only required to complete one of these. Section A deals with applications from owner-occupiers and tenants, and asks for information about your household and financial resources, and each person who is required to complete this section must sign a declaration about the information they give. Section B asks for financial information from landlords.

Part 4 – requires you to provide various enclosures with the application. You are also required to sign a declaration about the information you give in the application.

B. Your application will not be valid unless you complete all the relevant parts of this form and enclose the necessary documents required in Part 4.

C. All appearances of “you” and “your” in this application form – except in Section A of Part 3 – are to be treated as references to the grant applicant.

D. The references to notes in the forms are to the numbered notes at the end of the form.

E. If you are applying as an owner-occupier or tenant to carry out works to your dwelling, the dwelling which is the subject of the grant application must be intended to be the only or main residence of either you or a member of your family. No grant is available for second or holiday homes.

F. If you occupy a flat in a building, and you wish to carry out works both to your flat and to the common parts of the building, you may need to provide more than one certificate of future occupation with your

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application. If you have a tenancy of your flat with at least five years still to run, you will be regarded as an owner-occupier in relation to the application for works to your flat (so you should provide an owner-occupation certificate), and as a tenant in relation to the application for works to the common parts (for which you should provide a tenant's certificate). You only need complete one section (Section A) in Part 2, however. If you have a tenant's interest in your flat, you only need to provide one certificate (a tenant's certificate).

G. You cannot make an application for a grant as a tenant if you own or are proposing to buy the freehold of the property or if you already have, or are proposing to take, a tenancy of it with at least 5 years still to run. In these circumstances you would have to make an owner's application (either as an owner-occupier or landlord).

H. If you are a tenant you may need your landlord's permission to carry out the works covered by this application. Make sure you have obtained any necessary permission before submitting an application. If the works proposed are works to the common parts of the building, you also need to have a duty or power to carry them out.

I. If you have a mortgage you may find that the terms require your mortgagee's consent to apply for a grant (or carry out works). Make sure that you have obtained any necessary permission before submitting an application.

J. A grant will not normally be paid if you, or anyone else acting on your behalf, commence works before you receive written approval of this application. A grant will usually be refused if the works are completed before the application has been approved. Planning permission or building regulations approval is not the same as grant approval.

ADDRESSES FOR CORRESPONDENCE

To be completed by all grant applicants

Your name:

Address for correspondence:

Note 1

Telephone number: (home)
(work)

If someone (e.g. a friend or an organisation) is handling this application on your behalf, give the name, address and telephone number of the person to be contacted about this application.

Name:

Address:

Telephone number:

Please give the name and address of the person who may be contacted to gain access to the property (e.g. to carry out an inspection):

Name:

Address:

Telephone number:

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PART 1: INFORMATION ABOUT THE PROPERTY AND THE WORKS TO BE CARRIED OUT

Please answer each question in turn unless directed elsewhere (e.g. "Go to 1.7"). Please read the notes indicated on the right hand side before answering the questions to which they relate.

- 1.1 Do the proposed works include works to the common parts of a building containing one or more flats? **Note 2**
 Yes (Go to 1.2(a))
 No (Go to 1.2(b))
- 1.2 (a) Address of the building where the works are to be carried out: **Note 3**
 (b) Address of the dwelling where the works are to be carried out:
- 1.3 Have you made a previous application for any type of grant on this dwelling or building? **Note 4**
 Yes (Go to 1.4)
 No (Go to 1.5)
- 1.4 Please give the date of your application and Council reference (if known): **Note 4**
 Date: Reference:
- 1.5 Are you also applying for a renovation grant? **Note 5**
 Yes
 No
- 1.6 Is the disabled person for whom the adaptation or improvement is sought:- **Note 6**
 Tick box
 (a) yourself? (Go to 1.8)
 (b) someone living with you? (Go to 1.7)
 (c) your tenant? (Go to 1.7)
- 1.7 What is the disabled person's name?
- 1.8 Please describe the disability (give medical name if known):
- 1.9 Describe briefly the works for which disabled facilities grant is sought: **Note 7**
 (a) works to common parts (if any):
 (b) works to your house or flat:
- 1.10 Have you applied for planning permission? **Note 8**
 Yes
 No (Go to 1.13)
- 1.11 Please give the date of your application:
- 1.12 What was the outcome of your application? **Note 8**
 Tick box
 Granted
 Refused
 No decision yet
- 1.13 Have you applied for building regulations approval? **Note 8**
 Yes
 No (Go to 1.16)

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1.14 Please give the date of your application:

1.15 What was the outcome of your application?

Tick box

Granted

Refused

No decision yet

1.16 Will you or a member of your family carry out the works?

Yes

Note 9

No

1.17 Give details of any services or charges which you wish to have considered for grant:

Note 10

1.18 Do you wish the grant to be paid to someone other than yourself (e.g. your builder)?

Yes

No

(Go to Part 2)

1.19 Please give their name and address:

NOW GO TO PART 2

PART 2: INFORMATION ABOUT YOUR INTEREST IN THE PROPERTY AND HOW IT IS OCCUPIED

2.1 Are you applying as a charity, or is the application made in respect of glebe land or the residence house of an ecclesiastical benefice?

Note 11

Yes

(Go to Section B of Part 3)

No

(Go to 2.2)

2.2 Which type(s) of certificate of future occupation are you providing with your application?

Tick box

(a) an owner-occupation certificate only

Notes 12 and 13
(Go to Section A)

(b) an owner-occupation certificate and a tenant's certificate

Notes 12, 13 and 14
(Go to Section A)

(c) a certificate of intended letting

Notes 12 and 15
(Go to Section A)

(d) a tenant's certificate

Note 14
(Go to Section B)

SECTION A

Please answer each question in turn unless directed elsewhere.

2.3 Do the proposed works include works to the common parts of a building containing one or more flats?

Note 16

Yes

(Go to 2.4)

No

(Go to 2.6)

2.4 Do you have a duty or a power to carry out works to the common parts of the building?

Yes

(Go to 2.5)

No

Note 17

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- 2.5 Do you, or will you, (alone or jointly with others) own the freehold of the common parts where the works are to be carried out or have a tenancy with at least 5 years still to run of those common parts? Yes (Go to 2.7)
No (Go to 2.6)
- 2.6 Do you, or will you, (alone or jointly with others) own the freehold of the dwelling or have a tenancy of the dwelling with at least 5 years still to run? Yes (Go to 2.7)
No **Note 18**
- 2.7 Do you already have this interest? Yes
No (Go to 2.9)
- 2.8 Is this interest held jointly with other people? Yes (Go to 2.12)
No (Go to Part 3)
- 2.9 Do you intend to acquire this interest? Yes
No **Note 19**
- 2.10 When do you expect this to happen? (give approximate date): **Note 20**
- 2.11 Will the interest be held jointly with other people? Yes (Go to 2.12)
No (Go to Part 3)
- 2.12 Please give the name(s) and (if different from your own) address(es) of those people holding or intending to hold a joint interest, who are residing or intending to reside in the property:

NOW GO TO PART 3

SECTION B

Please answer each question in turn unless directed elsewhere.

- 2.13 Do the proposed works include works to the common parts of a building containing one or more flats? Yes (Go to 2.14)
No (Go to 2.16)
- 2.14 Do you have or intend to buy (alone or jointly with others) the freehold, or a tenancy with at least 5 years still to run, of the common parts where the works are to be carried out? Yes **Note 21**
No (Go to 2.15)
- 2.15 Do you have a duty or a power to carry out the works in the common parts? Yes **Note 17**
No
- 2.16 Do you have or intend to buy (alone or jointly with others) the freehold, or a tenancy with at least 5 years still to run, of the dwelling? Yes **Note 21**
No
- 2.17 Do you have a joint tenancy? Yes
No (Go to 2.19)
- 2.18 Give the name(s) and (if different from your own) address(es) of any joint tenants residing or intending to reside in the property:
- 2.19 Are you a tenant of the local authority? Yes
No

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2.20 Give the name, address and telephone number of the landlord or the landlord's agent (indicate which):

NOW GO TO PART 3

PART 3: FINANCIAL INFORMATION

- 3.1 Are you providing a certificate of intended letting with your application? Yes (Go to Section B)
 No (Go to 3.2)
- 3.2 Are you providing an owner-occupation certificate and/or tenant's certificate with your application? Yes (Go to 3.3)
 No Note 22
- 3.3 Are you, your partner and everyone else you may have mentioned in questions 1.7, 2.12 or 2.18 (and their partners) all on income support? Yes Note 23
 No (Go to Section A)

SECTION A: TEST OF RESOURCES FOR OWNER-OCCUPIERS AND TENANTS

Please answer each question in turn unless directed elsewhere. This section is to be completed in respect of yourself and your family. Duplicates of this section must also be completed in respect of each person or couple mentioned in question 2.12 (in the case of owner-occupiers) or 2.18 (in the case of tenants) and in respect of the person mentioned in question 1.7 if that person is an adult living or intending to live with you and is not included amongst those mentioned in question 2.12 or 2.18. References to "you" or "your" in this section (only) should therefore be treated as references to you and, if appropriate, to that person or persons.

YOU AND YOUR FAMILY

- 3.4 Please give your full name: Mr/Mrs/Miss/Ms
- 3.5 Please give your date of birth: / / Age:
- 3.6 Have you a partner living with you? Yes Note 24
 No (Go to 3.8)
- 3.7 Please give the following details in respect of your partner: Note 25
 Partner's full name: Mr/Mrs/Miss/Ms.....
 Date of birth: / / Age:
- 3.8 Are you or is your partner registered as blind?
 You Yes No
 Your partner Yes No
- 3.9 Have you or has your partner formerly been registered as blind, but ceased to be so registered because of regaining eyesight?
 You Yes (if yes for either, No (if no for both,
 Your partner Yes go to 3.10) No go to 3.11)

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3.10 Please give the date on which the registration ceased:

You
 Your partner

3.11 Are you, or is your partner, unable to work because of sickness, and have you or has your partner been so for at least the last 28 weeks?

Note 26

You Yes (if yes for either, go to 3.12) No (if no for both, go to 3.13)
 Your partner Yes No

3.12 Please give details including dates:

.....

3.13 Are you or is your partner provided with an invalid carriage or other vehicle, or receiving an allowance in respect of such a vehicle (including via the mobility scheme)?

You Yes (if yes for either, go to 3.14) No (if no for both, go to 3.15)
 Your partner Yes No

3.14 Please give details:

.....

3.15 Do you or your partner receive any of the following allowances or benefits in respect of illness or disability?

		Yes	No	
Attendance allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Disability living allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Disability working allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Invalid care allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 27
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Invalidity pension	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 28
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Mobility supplement	You	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Severe disablement allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	

3.16 If you receive, or your partner receives, the care component of disability living allowance (whether or not the allowance also consists of the mobility component), is the care component awarded at the highest, middle or lowest rate?

	Highest	Middle	Lowest
You	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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- 3.17 If you do not, or your partner does not, receive attendance allowance or the care component of disability living allowance at the highest or middle rate, is this because you are or your partner is undergoing treatment?
- | | | |
|--------------|--------------------------|--------------------------|
| | Yes | No |
| You | <input type="checkbox"/> | <input type="checkbox"/> |
| Your partner | <input type="checkbox"/> | <input type="checkbox"/> |
- 3.18 If you have answered "No" to the part of question 3.15 which asks about invalid care allowance, have you or has your partner received that allowance at any time in the last 8 weeks?
- | | | |
|--------------|--------------------------|--------------------------|
| | Yes | No |
| You | <input type="checkbox"/> | <input type="checkbox"/> |
| Your partner | <input type="checkbox"/> | <input type="checkbox"/> |
- 3.19 Does anyone receive an invalid care allowance for caring for you or your partner?
- | | | |
|-----|--------------------------|--------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | (Go to 3.21) |

3.20 Please give details, including the name of the person who receives the allowance and whether it is paid for caring for you or your partner:

.....

- 3.21 Do you or your partner have any dependent children, under the age of 19, living with you?
- | | | |
|-----|--------------------------|----------------|
| Yes | <input type="checkbox"/> | Note 29 |
| No | <input type="checkbox"/> | (Go to 3.31) |

3.22 Please give the details requested below, and in questions 3.23 to 3.30, in respect of each of these children:

Full Name	Date of Birth	What the child does (e.g. school, student, work, etc.)	Please state if the child is registered as blind, or if the child was registered but has ceased to be so (giving the date on which registration ceased), or receives attendance or disability living allowance or mobility supplement.
.....
.....
.....

READ NOTE 30 BEFORE PROCEEDING TO QUESTION 3.23

- 3.23 Does any child named in question 3.22 above work 16 hours per week or more?
- | | | |
|-----|--------------------------|------------------------|
| Yes | <input type="checkbox"/> | Notes 31 and 32 |
| No | <input type="checkbox"/> | (Go to 3.25) |

3.24 Please give details:

Name	Type of work	Gross pay	How often paid
.....	£.....
.....	£.....

- 3.25 Does any child named in question 3.22 above have any other income whatsoever?
- | | | |
|-----|--------------------------|--------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | (Go to 3.27) |

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3.26 Please give details: **Notes 33 and 34**

Name	Type of income	How much	How often paid
.....	£.....
.....	£.....

3.27 Does any child named in question 3.22 above have any savings or other investments? Yes **Note 35**
 No (Go to 3.29)

3.28 Please give details, including current value(s) where known:

Name:	Type:	Amount: £.....
Name:	Type:	Amount: £.....

3.29 Does any child named in question 3.22 above own any land, property, business or have any other capital whatsoever? Yes
 No (Go to 3.31)

3.30 Please give details, including current value(s) where known: **Note 36**

Name:	Details:
Name:	Details:

3.31 Is there anyone aged 18 or over who lives with you, apart from your partner or any dependent children? Yes
 No **Note 37**

3.32 Please give details:

Name:	Relationship to you:
Name:	Relationship to you:

3.33 Does any person named in question 3.32 above receive attendance allowance or the care component of disability living allowance at the highest or middle rate? Yes
 No

3.34 Please give details, including the name of the person who receives the allowance:

YOUR INCOME **Notes 38 and 39**

3.35 Are you, or is your partner, on income support? Yes **(Go to the Declaration at the end of this section)**
 No (Go to 3.36)

3.36 Are you, or is your partner, currently in paid employment? Yes
 No (Go to 3.40)

3.37 Please give the following details for each: **Note 40**

	You	Your partner
Name and address of employer:

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Please give details of the nature of the letting, and what the payments are intended to cover (e.g. heating, meals, etc.).

Maintenance from former partner	£.....	.....	£.....	.....
Other scholarships or bursaries etc.	£.....	.....	£.....	.....
Parent's or partner's contribution to student grant	£.....	.....	£.....	.....
Student grant	£.....	.....	£.....	.....
Student loan	£.....	.....	£.....	.....
YIS	£.....	.....	£.....	.....
Any other income	£.....	.....	£.....	.....

YOUR SAVINGS, INVESTMENT AND OTHER CAPITAL

Note 47

3.48 Do you or your partner have any cash, savings or other investments? Yes
 No (Go to 3.50)

3.49 Please give details of savings or other investments, including any of the following:

Notes 48 and 49

	You	Your partner
Bank current account	£.....	£.....
Bank deposit account	£.....	£.....
Bank other account(s)	£.....	£.....
	£.....	£.....
Building society account(s)	£.....	£.....
	£.....	£.....
Cash savings	£.....	£.....
National Savings Certificates	Issue No. Date Number held	Issue No. Date Number held
Post Office ordinary account	£.....	£.....
Post Office investment account	£.....	£.....
Premium Bonds	£.....	£.....
Stocks, shares and unit trusts etc.	Details Current value (if known) £	Details Current value (if known) £
Any other investments	Details Current value (if known) £	Details Current value (if known) £

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3.50 Please give details of any one-off payments received by you or your partner over the past 12 months, including the date(s) of such payment(s) where known:

Note 50

.....
.....

3.51 Do you or your partner own any land, property, business, or have any other capital whatsoever?

Yes
No

Notes 51 and 52
(Go to 3.53)

3.52 Please give details of capital, including current value(s) where known:

.....
.....

YOUR OUTGOINGS

3.53 Do you or your partner make a contribution in respect of a student grant for a son, daughter or partner?

Yes
No

(Go to the Declaration at the end of this section)

3.54 Please give details of contributions:

.....
.....

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this section is correct.

Signature: Date:

AUTHORISATION

(For persons receiving certain income related benefits)

(a) If you receive income support it may be possible for the Council to process your application more quickly if you give permission for your local Department of Social Security office to confirm this fact. If you wish to do this, please complete the authorisation below. If not, go to Part 4.

I authorise the Department of Social Security to confirm on request by the Council that I now receive income support.

Name:

DSS reference number (case paper or National Insurance number), if known:

.....

Signature: Date:

(b) If you receive housing benefit (HB), council tax benefit (CTB) or community charge benefit (CCB), but not income support, it may be possible for the Council to process your application more quickly if you give permission for them to refer to your HB, CTB or CCB records. They can only do this with your consent. If you are content for the Council to refer to your existing HB, CTB or CCB records, please sign the authorisation below.

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For the purpose of this application, I give my consent to the Council to refer to information provided by me for the purposes of my application(s) for housing benefit, council tax benefit and/or community charge benefit.

Name:

HR, CLB or CCB reference (if known):

Signature: Date:

NOW GO TO PART 4

SECTION B: FINANCIAL INFORMATION REQUIRED FROM LANDLORDS AND CHARITIES, AND IN RESPECT OF ECCLESIASTICAL PROPERTY

Please answer each question in turn unless directed elsewhere.

3.55 Is the application made in respect of the residence house of an ecclesiastical benefice? Yes No (Go to 3.59)

3.56 Please give details of any financial resources available to you: **Note 53**

3.57 Please give details and supply any other information as to your circumstances which may be relevant to your application:

3.58 Is the residence house currently let? Yes (Go to 3.68) No (Go to Part 4)

3.59 Are you applying as a charity, or is the application in respect of glebe land? Yes **Note 11** No (Go to 3.67)

3.60 Are you under any obligation, or is it your practice, to let dwellings at a rent which is less than a market rent? Yes (Go to 3.61) No (Go to 3.62)

3.61 Please give details:

3.62 Are any financial resources available to you in addition to the rent from the dwelling? Yes (Go to 3.63) No (Go to 3.64)

3.63 Please give details: **Note 54**

3.64 Are you under any obligation, or is it your practice, to dispose of properties improved or provided by conversion by you within a period of five years of carrying out those works? Yes (Go to 3.65) No (Go to 3.66)

3.65 Please give details:

3.66 Please supply any other relevant information as to your circumstances: **Note 55**

3.67 Is the dwelling currently let or subject to a statutory tenancy? Yes (Go to 3.68) No (Go to Part 4)

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- 3.68 Please indicate the type of tenancy or occupancy. **Note 56**
- | Is it | Tick box |
|---|--------------------------|
| (a) an assured tenancy? | <input type="checkbox"/> |
| (b) an assured shorthold tenancy? | <input type="checkbox"/> |
| (c) an assured agricultural occupancy which is a tenancy? | <input type="checkbox"/> |
| (d) a secure tenancy? | <input type="checkbox"/> |
| (e) a housing association tenancy under Part VI of the Rent Act 1977? | <input type="checkbox"/> |
| (f) a protected or statutory tenancy under the Rent Act 1977? | <input type="checkbox"/> |
| (g) a protected occupancy or statutory tenancy under the Rent (Agriculture) Act 1976? | <input type="checkbox"/> |
| (h) other (give details) | <input type="checkbox"/> |

3.69 Date current rent or licence fee set:

3.70 Current rent and rental period: £ per

3.71 If the tenancy/occupancy is for a fixed term, when does this term expire?

.....

- 3.72 Does the rent or licence fee include any of the following:
- | | Tick box |
|-----------------------------------|--------------------------|
| (a) water charges | <input type="checkbox"/> |
| (b) board | <input type="checkbox"/> |
| (c) furniture | <input type="checkbox"/> |
| (d) other services (give details) | <input type="checkbox"/> |

3.73 Please give details about your tenancy or occupancy which may be relevant to your application (including any terms of your tenancy or occupancy): **Note 57**

NOW GO TO PART 4

PART 4

- | Enclosures | Tick as enclosed | |
|---|--------------------------|----------------|
| A. Two estimates from different contractors of the cost of carrying out the works (unless otherwise instructed by the Council). | <input type="checkbox"/> | Note 58 |
| B. Particulars of any preliminary or ancillary services and charges. | <input type="checkbox"/> | Note 59 |
| C. Certificate(s) as to future occupation: | | |
| (a) An owner-occupation certificate only | <input type="checkbox"/> | |
| (b) An owner-occupation certificate and a tenant's certificate | <input type="checkbox"/> | |

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- (c) A certificate of intended letting
- (d) A tenant's certificate, together with a certificate of intended letting from your landlord

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this application is correct.

Date: Signature:

NOTES

1. If the applicant is a company or similar body, give the official (registered) address.
2. The works may be to common parts alone or in conjunction with works to a flat in the building. "Common parts" includes the structure and exterior of a building and common facilities provided, whether in the building or elsewhere, for persons who include the occupiers of one or more flats in the building.
3. References to "building" mean the building to which the common parts relate and, as the case may be, where the dwelling is situated. References to "dwelling" mean the house or flat occupied or to be occupied by the disabled person.
4. If you have made more than one previous application, give details of all of them and of any contribution of which you have been notified under a group repair scheme. Previous grant approvals may affect the works for which a grant may be given, and also the amount of grant payable.
5. If renovation works are needed to make your property fit for human habitation, your application for disabled facilities cannot be approved unless these works are carried out.
6. "Disabled person" is defined by reference to section 29(1) of the National Assistance Act 1948. If you are not sure whether the person for whom the works are to be carried out is someone to whom this provision applies, you should ask the Council (or your local Social Services Department).
7. If you are applying for a grant both to common parts and to your flat, you should distinguish between the works to the different parts. Give as full a description as you can of the proposed works. It will help you to supply plans.
8. Planning permission or building regulations approval may or may not be required. If you are not sure whether permission or approval is required, contact the relevant department of the Council. Where permission or approval has already been obtained, please enclose a copy with your application.
9. If you carry out the works yourself, or if they are carried out by a member of your family, you may be unable to give an invoice, demand or receipt for the works which would be acceptable to the Council for the purpose of payment of a grant. Please clarify this point with the Council.
10. Examples of preliminary or ancillary services and charges which may be included in a grant application are: technical and structural surveys; design and preparation of plans and drawings and preparation of schedules of works; obtaining of estimates; applications for building regulations approval and planning permission; supervision of the works; disconnection and reconnection of electricity, gas, water and drainage utilities made necessary by the works (but not charges arising from non-payment of bills); advice on contracts and on financing the cost of the works, including such services given by home improvement agencies; and the services of an occupational therapist. The Council can give full details of what charges and services would be eligible.
11. "Charity" does not include registered housing associations for grant purposes.
12. Having an "owner's interest" (see notes 13 and 15 below) means owning the freehold of the property, or having a tenancy with at least 5 years still to run at the date of the application, whether owned alone or jointly with others.

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13. An owner-occupation certificate certifies that:
- the applicant has, or proposes to acquire, an owner's interest in the dwelling or building and
 - the applicant, or a member of his or her family, intends to live in the dwelling or (as the case may be) a flat in the building as the applicant's or that person's only or main residence, for at least twelve months beginning on the date certified by the Council as the date on which the grant-aided works are completed to their satisfaction.

14. A tenant's certificate certifies that:
- the applicant is a tenant of the dwelling and
 - the applicant is required by the terms of his or her tenancy to carry out the works for which grant is sought and
 - the applicant, or a member of his or her family, intends to live in the dwelling as the applicant's or that person's only or main residence.

A tenant's application must normally be accompanied by a certificate of intended letting (see Note 14) provided by the landlord, but the Council may waive this requirement in the circumstances of a particular case.

15. A certificate of intended letting certifies that the applicant (or landlord in the case of a tenant's application):
- has, or proposes to acquire, an owner's interest in the dwelling or building
 - and intends to, or already has, let the dwelling or (as the case may be) one or more flats in the building as a residence, to someone other than a member of his or her family, for at least five years beginning on the date certified by the Council as the date on which the grant-aided works are completed to their satisfaction.

16. The works may be to common parts alone or in conjunction with works to a flat in the building.

17. If you have neither a power nor a duty to carry out works to the common parts of the building, you cannot apply for a disabled facilities grant towards such works.

18. If you have answered "No" to each of questions 2.5 and 2.6 you should not be making an owner's application. Please reconsider your answer. If you cannot answer "Yes" to one of these questions, you are unable to apply as a tenant (Section B), do not proceed any further with this application.

19. If you have answered "No" to both questions 2.7 and 2.9, you should not be making an owner's application. Please reconsider your answers. If you cannot answer "Yes" to one of these questions, and you are unable to apply as a tenant (Section B), do not proceed any further with this application.

20. If you have exchanged contracts on a purchase, give the date that the purchase is to be completed. The Council cannot approve this grant application until you actually have the required interest.

21. If you intend to buy the freehold of the property, or to take up a tenancy where at least 5 years of the term remain unexpired, you cannot make a tenant's application. You should instead consider making an owner's application (Section A of Part 2). This does not apply however if your application is for disabled facilities grant for works to common parts and you have a tenancy of a flat in the building.

22. You must provide one of the certificates mentioned in questions 3.1 and 3.2 (see notes 13 to 15 above), unless you are a charity or are applying on behalf of a charity or the application is in respect of glebe land or the residence house of an ecclesiastical benefice. If this is the case, go to Section B of Part 3. Otherwise, do not proceed any further with this application.

23. If you have answered "Yes" to question 3.3 you do not need to answer the questions in Section A of Part 3 (the test of resources). It may help the Council to process your application more quickly if each person who is on income support completes **authorisation (a)** at the end of that section. However, you are under no obligation to do this, and may instead go straight to Part 4 if you wish.

24. A partner is someone of the opposite sex who lives with you as husband or wife whether you are married or not. You should answer "No" to question 3.6 if such a person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

25. If you have more than one partner, and you are married polygamously under the law of a country which permits such marriages, you should give the details requested in respect of each partner living with you, and answer questions 3.7 to 3.54 below in respect of each of them. You should also ensure

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that your answers to questions 3.21 to 3.30 cover all children and young persons for whom you or any of your partners are responsible and who normally live with you.

26. Even if you or your partner have been capable of work in recent weeks, you may still qualify for the "disability premium" if you or your partner have a long record of incapacity. If you think this applies to you, you should still answer "No" to this question, but give full details under question 3.12.

27. Answer "Yes" to this question if you or your partner would be entitled to invalid care allowance but for an overlapping benefit (i.e. injury benefit, unemployability supplement, industrial death benefit, war pensions death benefit, and training allowance) or you or your partner receive a concessionary payment by way of compensation for the non-payment of invalid care allowance.

28. Answer "Yes" to this question if you or your partner no longer receives this pension because of payment of a retirement pension.

29. A dependent child or young person is someone:

- who is under the age of 19;
- for whom you or your partner are responsible;
- in respect of whom you or your partner receive child benefit, or who is treated as a child for child benefit purposes; and
- who normally lives with you.

You should not include any young person who is on income support. You should answer "No" if a child or young person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that child or young person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

30. If you or your partner are on income support, you need not answer questions 3.23 to 3.26.

31. Do not include any who are under 16 or who are still in full time education.

32. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the child who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

33. You should include benefits, charitable and voluntary payments, and maintenance payments.

34. You do not need to include attendance allowance, disability living allowance or mobility supplement.

35. You should include any of the following:

- cash savings;
- money in bank, building society or Post Office accounts;
- National Savings Certificates and Premium Bonds;
- stocks, shares and unit trusts.

36. You should include details of any capital payable in instalments, including in particular the total amount of any outstanding instalment or instalments.

37. For this purpose, a person lives with you if they share with you a room or rooms other than a bathroom, lavatory or communal area, e.g. hall; but not if you each pay separately for your accommodation to a landlord.

38. The Council may ask you to provide evidence of earnings covering the last 52 weeks in respect of any paid employment, together with details of any private pension plan payments made in the same period.

39. The Council may ask you to provide evidence of all other income received in the last 52 weeks.

40. If you have a partner and you are paid jointly, as a couple, enter the details in one or other column (it does not matter which) but not both.

41. Gross pay should include bonus or commission, overtime, holiday pay, sick pay or maternity pay.

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42. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the person who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

43. Please supply copies of the latest accounts which give details of your self-employment. Please include details of any pension plan payments, income tax and national insurance contributions paid.

44. Give the net amount if your pension is taxed.

45. You do not need to include any of the following:

- attendance allowance;
- community charge benefit;
- council tax benefit;
- disability living allowance;
- guardian's allowance;
- housing benefit;
- income support (see questions 3.3 and 3.35);
- payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;
- payments from the Fund i.e. money made available by the Secretary of State under a scheme set up on 24th April 1992 or, in Scotland, on 10th April 1992;
- payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
- payments under the "business on own account" scheme, the "personal reader service" or the "fares to work" scheme;
- social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other benefits and allowances may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

46. You do not need to include any of the following:

- anything listed in note 45;
- boarding-out or fostering payments made by a local authority, health authority or voluntary organisation;
- job start allowance;
- "Part III" payments i.e. payments made by a local authority under section 17 or 24 of the Children Act 1989 in respect of children and young people;
- payments made to you as a holder of the Victoria Cross or George Cross.

Certain other payments may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

47. The Council may ask you to provide evidence of all savings, investments and other capital.

48. If you have a partner and hold any savings, investments or other capital jointly, enter the details in one or other column (it does not matter which) but not both.

49. If you hold any capital jointly with people other than your partner, please include the full amount of that capital (where known) and state how many others have a share in it.

50. You do not need to include any of the following:

- community charge benefit;
- council tax benefit;
- housing benefit, or housing benefit transitional payments;
- "Part III" payments (see note 46);

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payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;

- payments from the Fund (see note 45);
- payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
- payments under the "business on own account" scheme, the "personal reader service" or the "fares to work" scheme;
- "start-up" payments to homeworkers assisted under the Blind Homeworkers' Scheme;
- social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other kinds of savings and capital payments may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

51. You should include second homes, holiday homes and any other property, including property abroad.

52. You do not need to include any of the following:

- your own home;
- the property which is the subject of this application;
- any property occupied by an elderly (i.e. aged 60 or over) or incapacitated relative of yours, or of a member of your family, as his or her only or main residence. "Relative" means any of the following: parents, parents-in-law, step-parents, sons, daughters, sons and daughters in law, stepsons and daughters, brothers and sisters, grandparents, grandchildren, uncles and aunts, nephews and nieces;
- if you are self-employed, the assets of your business.

Certain other capital payments may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a property or other capital falls into one of these categories you should include it and provide full details so that the Council can decide whether or not it can be disregarded.

53. Details given should include information about resources made available by the Diocesan Board of Finance, for example an extract from the annual budget of the Board. If you are not making this application as a representative of the Board, please give the address of the Board.

54. You should enclose a recent statement of accounts or annual report if available. In the case of glebe land, the Diocesan Board of Finance may provide details including an extract from the annual budget if appropriate.

55. A summary of a charity's trust deed, or similar document, should be provided in addition to any other information. In the case of glebe land, please indicate if the property or part of the property is currently occupied rent free by a licensed minister or lay worker.

56. If you are not sure of the type of tenancy or occupancy (for example whether it is an assured tenancy, protected tenancy or statutory tenancy), you might check this with the Council or with your own legal advisers, solicitor, the Citizens Advice Bureau or a legal advice centre.

57. This is needed to make a decision about notional rent. Examples are repairs for which you are responsible, any improvements you have carried out for which you are not responsible under the terms of your tenancy, or any disrepair or defect which may be attributable to your failure to comply with the terms of your tenancy.

58. The Council will normally ask for two estimates of the costs of works from different contractors; but they may require more or fewer than two estimates in any particular case. (See also note 7 above). These estimates should normally be itemised.

59. The particulars of any preliminary or ancillary services and charges are for the services and charges identified in question 1.17 - see note 10 above. Please include estimates.

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FORM 3 APPLICATION FOR COMMON PARTS GRANT

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FORM 3
APPLICATION FOR COMMON PARTS GRANT

(Name and address of Council)

THIS IS THE APPLICATION FORM TO BE USED WHEN APPLYING FOR A COMMON PARTS GRANT, FOR CARRYING OUT WORKS OF IMPROVEMENT OR REPAIR TO THE COMMON PARTS OF A BUILDING CONTAINING ONE OR MORE FLATS. DIFFERENT FORMS SHOULD BE USED IF APPLYING FOR A RENOVATION GRANT (FORM 1), DISABLED FACILITIES GRANT (FORM 2) OR AN HMO GRANT (FORM 4). WHEN YOU HAVE COMPLETED THIS FORM, PLEASE SEND IT TO THE COUNCIL.

IF YOU ARE UNCERTAIN HOW TO ANSWER ANY OF THE QUESTIONS, PLEASE CONTACT:

(Name, address and telephone number of contact in the Council)

IMPORTANT

PLEASE READ THE FOLLOWING NOTES BEFORE STARTING THIS APPLICATION FORM

A. This form is in four parts:-

Part 1 – asks for information about the building and about the works to be carried out.

Part 2 – asks for information about the interest you have in the building or in a flat in the building, and about the way it is occupied. This part contains two sections, and each participant in a tenants' common parts application must complete Section B in this part.*

Part 3 – contains two sections, and you are only required to complete one of these. Section A asks for information about the household and financial resources of tenants. Each participant in a tenants' common parts application must complete Section A of this part.* Section B asks for financial information from landlords.

Part 4 – requires you to provide various enclosures with the application. Each participant is also required to sign a declaration about the information he gives in the application.

*Please ensure that duplicate copies of Parts 2 and 3 are supplied for each participant to complete.

B. Your application will not be valid unless you complete all the relevant parts of this form and enclose the necessary documents required in Part 4.

C. All appearances of "you" and "your" in this application form – except in Section A of Part 3 – are to be treated as references to the grant applicant or, as the case may be, to each of the applicants.

D. "Tenant" in this form includes someone who has a tenancy of a flat with at least 5 years still to run at the time of the application.

E. The references to notes in the forms are to the numbered notes at the end of the form.

F. Common parts grant is not available on any building which is less than 10 years old or, where the common parts have been created in the course of the conversion of a building, where the conversion took place less than 10 years ago.

G. Common parts grant is not available to prospective purchasers of buildings or flats.

H. If the works you wish to carry out are adaptations or improvements to common parts for the benefit of a disabled person living in a flat in the building you should apply instead for a disabled facilities grant (Form 2).

I. There are two types of application for common parts grants, both of which are covered in this form. If you own the freehold of the building or a tenancy of it of which not less than 5 years remain unexpired you can make a "landlord's common parts application", provided you also have a power or duty to

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carry out the works in question. Usually if you are a tenant of a flat in the building, and occupy the flat as your only or main residence, and you have a duty to carry out some or all of the works or to contribute to the costs of carrying them out, then you can join in a "tenants' common parts application". At least three-quarters of tenants in this position in the building will need to be involved in a tenants' common parts application; you cannot apply on your own. Landlords can also join with their tenants (as "participating landlords") in a tenants' common parts application.

J. Participants in a tenants' common parts application may wish to appoint someone to co-ordinate their application, and if grant is approved any fees incurred could be included in the costs forming the basis of the grant calculation. It is envisaged that the information required in Parts 1 and 4 of the form will be provided by just one of the participants; each participant must supply the information required in Parts 2 and 3 in his or her own right.

K. If you are making a tenants' common parts application, you may need your landlord's permission to carry out works – for example where you are under a duty to contribute to the costs of works, but where the duty to carry them out rests with the landlord. Make sure you have obtained any necessary permission before submitting your application.

L. If you have a mortgage you may find that the terms require your mortgagee's consent to apply for a grant (or to carry out works). Make sure that you have obtained any necessary permission before submitting an application.

M. Grant will not normally be paid if you, or anyone else acting on your behalf, commence works before you receive written approval of this application. Exceptions may be made where the works are required to comply with certain notices (e.g. those served under sections 189 or 190 of the Housing Act 1985). Grant will usually be refused if the works are completed before the application has been approved. Planning permission or building regulations approval is not the same as grant approval.

ADDRESSES FOR CORRESPONDENCE

To be completed by the grant applicant or the person co-ordinating a tenants' common parts application

Your name:

Address for correspondence:

Note 1

Your telephone number: (home)
(work)

If someone else (e.g. a friend or an organisation) is handling this application on your behalf, give the name, address and telephone number of the person to be contacted about this application.

Name:

Address:

Telephone number:

If you are a tenant, please give the name and address of your landlord or the landlord's agent (indicate which).

Name:

Address:

Telephone number:

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Please give the name, address and telephone number of the person who may be contacted to gain access to the property (e.g. to carry out an inspection).

Name:

Address:

Telephone number:

PART 1: INFORMATION ABOUT THE PROPERTY AND THE WORKS TO BE CARRIED OUT

Please answer each question in turn unless directed elsewhere (e.g. "Go to 1.7"). The notes indicated on the right hand side should be read before answering the questions to which they relate.

- 1.1 Address of the building at which works are to be carried out: **Notes 2 and 3**
- 1.2 How many flats are there in the building? **Note 4**
- 1.3 Was the building—
- | | | | |
|---------------------------------------|-----|--------------------------|---------------|
| (a) built more than 10 years ago? | Yes | <input type="checkbox"/> | |
| or | No | <input type="checkbox"/> | Note 5 |
| (b) converted more than 10 years ago? | Yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | Note 5 |
- 1.4 Have you made a previous application for any type of grant on this property? **Note 5**
- | | | | |
|--|-----|--------------------------|-------------|
| | Yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | (Go to 1.6) |
- 1.5 Please give the date of your application and Council reference (if known): **Note 6**
- | | | | |
|-------|------------|--|--|
| Date: | Reference: | | |
|-------|------------|--|--|
- 1.6 Do you know of any previous application for grant made by another person on this property? **Note 6**
- | | | | |
|--|-----|--------------------------|-------------|
| | Yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | (Go to 1.8) |
- 1.7 Please give details (if known): **Note 7**
- 1.8 Please describe the proposed works: **Note 8**
- 1.9 Are any of the works required to comply with a notice under sections 189 or 190 of the Housing Act 1985? **Note 9**
- | | | | |
|--|-----|--------------------------|--------------|
| | Yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | (Go to 1.11) |
- 1.10 Please give details, including the date the notice was served:
- 1.11 Have you applied for planning permission? **Note 10**
- | | | | |
|--|-----|--------------------------|--------------|
| | Yes | <input type="checkbox"/> | |
| | No | <input type="checkbox"/> | (Go to 1.14) |
- 1.12 Please give the date of your application:

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- 1.13 What was the outcome of your application?
- Tick box
- Granted
- Refused
- No decision yet
- 1.14 Have you applied for building regulations approval? Yes **Note 10**
- No (Go to 1.17)
- 1.15 Please give the date of your application:
- 1.16 What was the outcome of your application?
- Tick box
- Granted
- Refused
- No decision yet
- 1.17 Will you or a member of your family carry out the works? Yes **Note 11**
- No
- 1.18 Please give details of any services or charges which you wish to have considered for grant: **Note 12**
- 1.19 Do you wish the grant to be paid to someone other than yourself (e.g. your builder)? Yes
- No (Go to Part 2)
- 1.20 Please give their name and address:

NOW GO TO PART 2

PART 2: INFORMATION ABOUT YOUR INTEREST IN THE PROPERTY AND HOW IT IS OCCUPIED

- 2.1 Are you the LANDLORD of the building? **Note 13**
- Yes (Go to Section A)
- No (Go to 2.2)
- 2.2 Are you a TENANT of a flat in the building? **Note 13**
- Yes (Go to Section B)
- No **Note 14**

SECTION A: TO BE COMPLETED BY LANDLORDS

Please answer each question in turn unless directed elsewhere.

- 2.3 Do you (alone or jointly with others) own the freehold of the building or have a tenancy of the building with at least 5 years still to run? Yes
- No **Note 15**
- 2.4 Do you have a duty or a power to carry out all of the works? Yes
- No **Note 16**

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- 2.5 Give details of any works to be grant-aided for which you are not liable:
- 2.6 Are you— Tick box
- (a) making a landlord's common parts application? (Go to Section B of Part 3)
- or
- (b) applying as a participating landlord in a tenants' common parts application? (Go to 2.7)
- 2.7 Please give details of any liability which you have for carrying out, or paying for, the works to the common parts: Note 17
- 2.8 How many people (including yourself) are liable for carrying out or paying for the costs of works to the common parts? Note 18

NOW GO TO SECTION B OF PART 3

SECTION B: TO BE COMPLETED BY ALL PARTICIPATING TENANTS

Please answer each question in turn unless directed elsewhere.

- 2.9 Please give your name and address: Note 19
- 2.10 Do you occupy your flat as your only or main residence? Yes No Note 20
- 2.11 Is your tenancy of this flat held jointly with others? Yes No (Go to 2.13)
- 2.12 Please give the name(s) of any joint tenant(s) who intend to reside in the flat you occupy:
- 2.13 Are you liable for carrying out some or all of the works to the common parts for which grant is sought? Yes (Go to 2.14)
No (Go to 2.15)
- 2.14 Please give the details of any of these works for which you are not liable:
- 2.15 Are you liable to contribute to the costs of carrying out some or all of these works to the common parts? Yes
No Note 21
- 2.16 Please give details of any costs for which you are not liable:
- 2.17 Are your liabilities specified in your tenancy agreement? Yes
No (Go to 2.19)
- 2.18 Please give details: Note 22
- 2.19 How many people (including yourself) are liable for carrying out or paying for the costs of works to the common parts? Note 18

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NOW GO TO SECTION A OF PART 3

PART 3: FINANCIAL INFORMATION

SECTION A: TEST OF RESOURCES FOR PARTICIPATING TENANTS

Please answer each question in turn unless directed elsewhere. This section is to be completed in respect of yourself and your family. Duplicates of this section must also be completed in respect of each person or couple mentioned in question 2.12. References to "you" or "your" in this section (only) should therefore be treated as references to you and, if appropriate, to that person or persons.

YOU AND YOUR FAMILY

3.1 Are you, your partner and everyone else you may have mentioned in question 2.12 (and their partners) all on income support? Yes No **Note 23**

3.2 Please give your full name. Mr/Mrs/Miss/Ms

3.3 Please give your date of birth: / / Age:

3.4 Have you a partner living with you? Yes No **Note 24**
(Go to 3.6)

3.5 Please give the following details in respect of your partner: **Note 25**

Partner's full name: Mr/Mrs/Miss/Ms.....

Date of birth: / / Age:

3.6 Are you or is your partner registered as blind?
You Yes No
Your partner Yes No

3.7 Have you, or has your partner, formerly been registered as blind, but ceased to be so registered because of regaining eyesight?
You Yes (if yes for either, No (if no for both,
go to 3.8) No
Your partner Yes No (if no for both, go to 3.9)

3.8 Please give the date on which the registration ceased:
You
Your partner

3.9 Are you, or is your partner, unable to work because of sickness, and have you or has your partner been so for at least the last 28 weeks? **Note 26**
You Yes (if yes for either, No (if no for both,
go to 3.10) No
Your partner Yes No (if no for both, go to 3.11)

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3.10 Please give details including dates:

.....

3.11 Are you or is your partner provided with an invalid carriage or other vehicle, or receiving an allowance in respect of such a vehicle (including via the mobility scheme)?

You	Yes	<input type="checkbox"/>	(if yes for either, go to 3.12)	No	<input type="checkbox"/>	(if no for both, go to 3.13)
Your partner	Yes	<input type="checkbox"/>		No	<input type="checkbox"/>	

3.12 Please give details:

.....

3.13 Do you or your partner receive any of the following allowances or benefits in respect of illness or disability?

		Yes	No	
Attendance allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Disability living allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Disability working allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Invalid care allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 27
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Invalidity pension	You	<input type="checkbox"/>	<input type="checkbox"/>	Note 28
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Mobility supplement	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	
Severe disablement allowance	You	<input type="checkbox"/>	<input type="checkbox"/>	
	Your partner	<input type="checkbox"/>	<input type="checkbox"/>	

3.14 If you receive, or your partner receives, the care component of disability living allowance (whether or not the allowance also consists of the mobility component), is the care component awarded at the highest, middle or lowest rate?

	Highest	Middle	Lowest
You	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.15 If you do not, or your partner does not, receive attendance allowance or the care component of disability living allowance at the highest or middle rate, is this because you or your partner is undergoing treatment?

	Yes	No
You	<input type="checkbox"/>	<input type="checkbox"/>
Your partner	<input type="checkbox"/>	<input type="checkbox"/>

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- 3.16 If you or your partner have answered "No" to the part of question 3.13 which asks about invalid care allowance, have you or has your partner received that allowance at any time in the last 8 weeks?
- | | | | |
|--|--------------|--------------------------|--------------------------|
| | | Yes | No |
| | You | <input type="checkbox"/> | <input type="checkbox"/> |
| | Your partner | <input type="checkbox"/> | <input type="checkbox"/> |
- 3.17 Does anyone receive an invalid care allowance for caring for you or your partner?
- | | | |
|-----|--------------------------|--------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | (Go to 3.19) |

3.18 Please give details, including the name of the person who receives the allowance and whether it is paid for caring for you or your partner:

.....

- 3.19 Do you or your partner have any dependent children, under the age of 19, living with you?
- | | | |
|-----|--------------------------|----------------|
| Yes | <input type="checkbox"/> | Note 29 |
| No | <input type="checkbox"/> | (Go to 3.29) |

3.20 Please give the details requested below, and in questions 3.21 to 3.28, in respect of each of these children:

Full Name	Date of Birth	What the child does (e.g. school, student, work, etc.)	Please state if the child is registered as blind, or if the child was registered but has ceased to be so (giving the date on which registration ceased), or receives attendance or disability living allowance or mobility supplement.
.....
.....
.....

READ NOTE 30 BEFORE PROCEEDING TO QUESTION 3.21

- 3.21 Does any child named in question 3.20 above work 16 hours per week or more?
- | | | |
|-----|--------------------------|------------------------|
| Yes | <input type="checkbox"/> | Notes 31 and 32 |
| No | <input type="checkbox"/> | (Go to 3.23) |

3.22 Please give details:

Name	Type of work	Gross pay	How often paid
.....	£.....
.....	£.....

- 3.23 Does any child named in question 3.20 above have any other income whatsoever?
- | | | |
|-----|--------------------------|--------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | (Go to 3.25) |

3.24 Please give details:

Name	Type of income	How much	How often paid
.....	£.....
.....	£.....

- 3.25 Does any child named in question 3.20 above have any savings or other investments?
- | | | |
|-----|--------------------------|--------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | (Go to 3.27) |

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3.26 Please give details, including current value(s) where known: **Note 35**
 Name: Type: Amount: £.....
 Name: Type: Amount: £.....

3.27 Does any child named in question 3.20 above own any land, property, business or have any other capital whatsoever? Yes
 No (Go to 3.29)

3.28 Please give details, including current value(s) where known: **Note 36**
 Name: Details:
 Name: Details:

3.29 Is there anyone aged 18 or over who lives with you, apart from your partner or any dependent children? Yes
 No **Note 37**

3.30 Please give details:
 Name: Relationship to you:

3.31 Does any one named in question 3.30 above receive attendance allowance or the care component of disability living allowance at the highest or middle rate? Yes
 No

3.32 Please give details, including the name of the person who receives the allowance:

YOUR INCOME

3.33 Are you, or is your partner, on income support? **Notes 38 and 39**
 Yes (Go to the Declaration at the end of this section)
 No (Go to 3.34)

3.34 Are you, or is your partner, currently in paid employment? Yes
 No (Go to 3.38)

3.35 Please give the following details for each: **Note 40**

	You	Your partner	
Name and address of employer:	
Occupation/job title:	
Gross pay:	£.....	£.....	Note 41
How often paid:	
Income tax paid:	£.....	£.....	
National Insurance contributions:	£.....	£.....	

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Occupational or private pension plan payments: £..... £.....
 Average hours worked per week (if less than 16 hours): **Note 42**

3.36 Do you or does your partner have any other paid employment (e.g. second, part-time or casual job(s))? Yes
 No (Go to 3.38)

3.37 Please give the following details for each job: **Note 40**

	You	Your partner	
Name and address of employer:	
Occupation/job title:	
Gross pay:	£.....	£.....	Note 41
How often paid:	
Income tax paid:	£.....	£.....	
National Insurance contributions:	£.....	£.....	
Occupational or private pension plan payments:	£.....	£.....	
Average hours worked per week (if less than 16 hours):	Note 42

3.38 Are you or is your partner self-employed? Yes
 No (Go to 3.40)

3.39 Please give details of self-employment: **Note 43**

3.40 Do you or your partner receive a pension of any kind? Yes
 No (Go to 3.42)

3.41 Please give details of the pension(s) received by you or your partner: **Notes 40 and 44**

	You		Your partner	
	Amount	How often paid	Amount	How often paid
Retirement pension	£.....	£.....
Occupational pension	£.....	£.....
Widow's pension	£.....	£.....
War widow's pension	£.....	£.....
War disablement pension	£.....	£.....
Any other pension(s)	£.....	£.....
	£.....	£.....

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3.42 Do you or your partner receive any state benefit(s)? Yes
 No (Go to 3.44)

3.43 Please give details of the benefits received by you or your partner, including any of the following: **Notes 40 and 45**

	You		Your partner	
	Amount	How often paid	Amount	How often paid
Child benefit	£.....	£.....
Disability working allowance	£.....	£.....
Family credit	£.....	£.....
Incapacity benefit	£.....	£.....
Incapacity care allowance	£.....	£.....
One parent benefit	£.....	£.....
Severe disablement allowance	£.....	£.....
Sickness benefit	£.....	£.....
Statutory maternity pay	£.....	£.....
Statutory sick pay	£.....	£.....
Unemployment benefit	£.....	£.....
Any other benefit(s)	£.....	£.....

3.44 Do you or your partner receive any other income whatsoever? Yes
 No (Go to 3.46)

3.45 Please give details of this income, including any of the following: **Notes 40 and 46**

	You		Your partner	
	Amount	How often paid	Amount	How often paid
Adoption allowance	£.....	£.....
Annuities	£.....	£.....
Charitable income and voluntary payments	£.....	£.....
Please give details of what the payments are intended to cover (e.g. heating, meals etc.).				
Government training allowance	£.....	£.....
Income from tenants, sub-tenants, or persons to whom board and lodging accommodation is provided	£.....	£.....
Please give details of the nature of the letting, and what the payments are intended to cover (e.g. heating, meals etc.).				
Maintenance from former partner	£.....	£.....
Other scholarships or bursaries etc.	£.....	£.....

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Parent's or partner's contribution to student grant	£.....	£.....
Student grant	£.....	£.....
Student loan	£.....	£.....
YTS	£.....	£.....
Any other income	£.....	£.....
	£.....	£.....

YOUR SAVINGS, INVESTMENT AND OTHER CAPITAL

Note 47

3.46 Do you or your partner have any cash, savings or other investments? Yes
 No (Go to 3.48)

3.47 Please give details of savings or other investments, including any of the following:

Notes 48 and 49

	You	Your partner
Bank current account	£.....	£.....
Bank deposit account	£.....	£.....
Bank other account(s)	£..... £.....	£..... £.....
Building society account(s)	£..... £.....	£..... £.....
Cash savings	£.....	£.....
National Savings Certificates	Issue No. Date Number held	Issue No. Date Number held
Post Office ordinary account	£.....	£.....
Post Office investment account	£.....	£.....
Premium Bonds	£.....	£.....
Stocks, shares and unit trusts etc.	Details Current value (if known) £	Details Current value (if known) £
Any other investments	Details Current value (if known) £	Details Current value (if known) £

3.48 Please give details of any one-off payments received by you or your partner over the past 12 months, including the date(s) of such payment(s) where known:

Note 50

.....

3.49 Do you or your partner own any land, property, business, or have any other capital whatsoever? Yes
 No **Notes 51 and 52**
 (Go to 3.51)

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3.50 Please give details of capital, including current value(s) where known:

.....
.....

YOUR OUTGOINGS

3.51 Do you or your partner make a contribution in respect of a student grant for a son, daughter or partner?

Yes
No

(Go to the Declaration at the end of this section)

3.52 Please give details of contributions:

.....
.....

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this section is correct.

Signature: Date:

AUTHORISATION

(For persons receiving certain income related benefits)

(a) If you receive income support it may be possible for the Council to process your application more quickly if you give permission for your local Department of Social Security office to confirm this fact. If you wish to do this, please complete the authorisation below. If not, go to Part 4.

I authorise the Department of Social Security to confirm on request by the Council that I now receive income support.

Name:

DSS reference number (case paper or National Insurance number), if known:

.....

Signature: Date:

(b) If you receive housing benefit (HB), council tax benefit (CTB) or community charge benefit (CCB), but not income support, it may be possible for the Council to process your application more quickly if you give permission for them to refer to your HB, CTB or CCB records. They can only do this with your consent. If you are content for the Council to refer to your existing HB, CTB or CCB records, please sign the authorisation below.

For the purpose of this application, I give my consent to the Council to refer to information provided by me for the purposes of my application(s) for housing benefit, council tax benefit and/or community charge benefit.

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3.63 Please give details:

3.64 Please supply any other relevant information as to your circumstances:

Note 60

NOW GO TO PART 4

PART 4			
Enclosures		Tick as enclosed	
A.	Two estimates from different contractors of the cost of carrying out the works (unless otherwise instructed by the Council).	<input type="checkbox"/>	Note 61
B.	Particulars of any preliminary or ancillary services and charges.	<input type="checkbox"/>	Note 62
C.	A common parts certificate signed by each of the applicants.	<input type="checkbox"/>	Note 63

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this application is correct.

Signature: Date:

NOTES

1. If the applicant is a company or similar body, give the official (registered) address.
2. The questions in the remainder of this form relate to the building mentioned here.
3. To be eligible for common parts grant, a building must contain at least one flat.
4. A "flat" is a dwelling which is a separate set of premises, whether or not on the same floor, divided horizontally from some other part of the building.
5. Common parts grant is not available for any building which is less than 10 years old or, where the common parts have been created in the course of the conversion of the building, where the conversion took place less than 10 years ago.
6. If you have made more than one previous application, give details of all of them and of any contribution of which you have been notified under a group repair scheme. Previous grant approvals may affect the works for which a grant may be given, and also the amount of grant payable.
7. If you are aware of more than one previous grant application, give details of all of them and of any contribution of which you have been notified under a group repair scheme, if known. Previous grant approvals may affect the works for which a grant may be given.
8. Give as full a description as you can of the proposed works. It will help you to supply plans, and in the case of works of improvement these should be of the property before and after the works have been carried out. If the Council require the works to be carried out to their specifications, this should be the basis for the contractors' estimates enclosed with this form (see Part 4 – enclosure A).
9. Notices under section 189 or 190 of the Housing Act 1985 specifying works to the common parts of a building may be served on a person who is an owner of that part of the building (or the building as a whole) who, in the opinion of the authority serving the notice, ought to carry out the works.

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10. Planning permission or building regulations approval may or may not be required. If you are not sure whether permission or approval is required, contact the relevant department of the Council. Where permission or approval has already been obtained, please enclose a copy with your application.

11. If you carry out the works yourself, or if they are carried out by a member of your family, you may be unable to give an invoice, demand or receipt for the works which would be acceptable to the Council for the purpose of payment of a grant. Please clarify this point with the Council.

12. Examples of preliminary or ancillary services and charges which may be included in a grant application are: technical and structural surveys; design and preparation of plans and drawings and preparation of schedules of works; obtaining of estimates; applications for building regulations approval and planning permission; supervision of the works; disconnection and reconnection of electricity, gas, water and drainage utilities made necessary by the works (but not charges arising from non-payment of bills); advice on contracts and on financing the costs of the works, including such services given by home improvement agencies. The Council can give full details of what services and charges are eligible.

13. In some circumstances the landlord may separately have a leasehold interest in a flat in the building. If you are in this position, you should answer "Yes" to both questions 2.1 and 2.2, but complete only Section A of Part 2 of the form.

14. If you have answered "No" to both questions 2.1 and 2.2, you are not eligible to make either a landlord's or tenants' common parts application. Please reconsider your answers to these two questions. If you cannot answer "Yes" to one of these questions then do not proceed any further with this application.

15. If you have answered "No" to question 2.3 you do not have the necessary interest to make a landlord's common parts application. Please reconsider your answer. If you cannot answer "Yes" to this question then do not proceed any further with this application.

16. If you are making a landlord's common parts application, you need to have a power or a duty to carry out all the works. If you have neither of these, you are not eligible to make a landlord's common parts application. Please reconsider your answer. If you have a power or a duty to carry out some of the works, you could consider joining in a tenants' application as a "participating landlord". Otherwise, do not proceed any further with this application.

17. Please enclose with your application a copy of the relevant part(s) of any tenancy agreement or other document setting out your liabilities.

18. If your liabilities are not specified in your tenancy agreement, you need to state how many people share the liability to carry out the works, or to meet the costs of carrying them out. For these purposes, a tenancy held jointly by two or more people is counted as if it were held by a single person.

19. The name and address to be inserted here is that of the person completing this part of the form, who should be one of the participating tenants.

20. If you have answered "No" to question 2.10 then you are not eligible to participate in a tenants' common parts application. Please reconsider your answer to this question. If you cannot answer "Yes" to it then do not join in making this application.

21. If you have answered "No" to both questions 2.13 and 2.15 then you are not eligible to make a tenants' common parts application. Please reconsider your answers. If you cannot answer "Yes" to one of these questions then do not proceed any further with this application.

22. Please enclose a copy of the relevant part(s) of your tenancy agreement or state what has been agreed between you and your landlord.

23. If you have answered "Yes" to question 3.1 you do not need to answer the questions in the rest of this section. You must however complete the Declaration at the end of this section. It may help the Council to process your application more quickly if each person who is on income support completes **authorisation (a)** in addition to the declaration.

24. A partner is someone of the opposite sex who lives with you as husband or wife whether you are married or not. You should answer "No" if such a person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

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25. If you have more than one partner, and you are married polygamously under the law of a country which permits such marriages, you should give the details requested in respect of each partner living with you, and answer questions 3.5 to 3.14 below in respect of each of them. You should also ensure that your answers to questions 3.19 to 3.28 cover all children and young persons for whom you or any of your partners are responsible and who normally live with you.

26. Even if you or your partner have been capable of work in recent weeks, you may still qualify for the "disability premium" if you or your partner have a long record of incapacity. If you think this applies to you, you should still answer "No" to this question, but give full details under question 3.10.

27. Answer "Yes" to this question if you or your partner would be entitled to invalid care allowance but for an overlapping benefit (i.e. injury benefit, unemployability supplement, industrial death benefit, war pensions death benefit, and training allowance) or you or your partner receive a concessionary payment by way of compensation for the non-payment of invalid care allowance.

28. Answer "Yes" to this question if you or your partner no longer receive this pension because of payment of a retirement pension.

29. A dependent child or young person is someone:
who is under the age of 19;
– for whom you or your partner are responsible;
– in respect of whom you or your partner receive child benefit, or who is treated as a child for child benefit purposes; and
– who normally lives with you.

You should not include any young person who is on income support. You should answer "No" if a child or young person who normally lives with you is absent and is likely to remain so for more than 52 weeks; but you should answer "Yes" if that child or young person's absence is owing to exceptional circumstances beyond his or her control and is unlikely to be substantially more than 52 weeks.

30. If you or your partner are on income support, you need not answer questions 3.21 to 3.24.

31. Do not include any who are under 16 or who are still in full time education.

32. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the child who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

33. You should include benefits, charitable and voluntary payments, and maintenance payments.

34. You do not need to include attendance allowance, disability living allowance or mobility supplement.

35. You should include any of the following:
– cash savings;
– money in bank, building society or Post Office accounts;
– National Savings Certificates and Premium Bonds;
– stocks, shares and unit trusts.

36. You should include details of any capital payable in instalments, including in particular the total amount of any outstanding instalment or instalments.

37. For this purpose, a person lives with you if they share with you a room or rooms other than a bathroom, lavatory or communal area e.g. hall; but not if you each pay separately for your accommodation to a landlord.

38. The Council may ask you to provide evidence of earnings, covering the last 52 weeks in respect of any paid employment, together with details of any private pension plan payments made in the same period.

39. The Council may ask you to provide evidence of all other income received in the last 52 weeks.

40. If you have a partner and you are paid jointly, as a couple, enter the details in one or other column (it does not matter which) but not both.

41. Gross pay should include any bonus or commission, overtime, holiday pay, sick pay or maternity pay.

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42. In calculating the number of hours worked per week, you should look at the last cycle of your working hours (if you have a recognisable cycle) or (if you have not) at the last five weeks, immediately prior to this application. You should not include any day on which the person who would otherwise be working is on maternity leave or is absent from work because he or she is ill.

43. Please supply copies of the latest accounts which give details of your self-employment. Please include details of any pension plan or retirement annuity payments, income tax and national insurance contributions paid.

44. Give the net amount if your pension is taxed.

45. You do not need to include any of the following:

- attendance allowance;
- community charge benefit;
- council tax benefit;
- disability living allowance;
- guardian's allowance;
- housing benefit;
- income support (see questions 3.1 and 3.33);
- payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;
- payments from the Fund i.e. money made available by the Secretary of State under a scheme set up on 24th April 1992 or, in Scotland, on 10th April 1992;
- payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
- payments under the "business on own account" scheme, the "personal reader service" or the "fares to work" scheme;
- social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other benefits and allowances may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt about whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

46. You do not need to include any of the following:

- anything listed in note 45;
- boarding-out or fostering payments made by a local authority, health authority or voluntary organisation;
- job start allowance;
- "Part III" payments i.e. payments made by a local authority under section 17 or 24 of the Children Act 1989 in respect of children and young people;
- payments made to you as a holder of the Victoria Cross or George Cross.

Certain other payments may also be disregarded in calculating your income, but for the purposes of completing this form you should only exclude those payments mentioned above. If you are in any doubt whether a payment falls into one of these categories you should include it and provide full details of the nature of the payment so that the Council can decide whether or not it can be disregarded.

47. The Council may ask you to provide evidence of all savings, investments and other capital.

48. If you have a partner and hold any savings, investments or other capital jointly, enter the details in one or other column (it does not matter which) but not both.

49. If you hold any capital jointly with people other than your partner, please include the full amount of that capital (where known) and state how many others have a share in it.

50. You do not need to include any of the following:

- community charge benefit;
- council tax benefit;
- housing benefit, or housing benefit transitional payments:
payments from the Macfarlane Trusts, the Independent Living Fund, the Independent Living (Extension) Fund or the Independent Living (1993) Fund;
- payments from the Fund (see note 45);
- "Part III" payments (see note 46);

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- payments to compensate for the loss of entitlement to supplementary benefit where you did not become entitled to income support for a period beginning on 11th April 1988;
- payments under the "business on own account" scheme, the "personal reader service" or the "lures to work" scheme;
- "start-up" payments to homeworkers assisted under the Blind Homeworkers' Scheme;
- social fund payments under Part VIII of the Social Security Contributions and Benefits Act 1992.

Certain other kinds of savings and capital payments may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those items mentioned above. If you are in any doubt about whether an investment or capital payment falls into one of these categories you should include it and provide full details so that the Council can decide whether or not it can be disregarded.

51. You should include second homes, holiday homes and any other property, including property abroad.

52. You do not need to include any of the following:

- your own home;
- the property which is the subject of this application;
- any property occupied by an elderly (i.e. aged 60 or over) or incapacitated relative of yours, or of a member of your family, as his or her only or main residence. "Relative" means any of the following: parents, parents-in-law, step-parents, sons and daughters, sons and daughters-in-law, stepsons and daughters, brothers and sisters, grandparents, grandchildren, uncles and aunts, nephews and nieces;
- if you are self-employed, the assets of your business.

Certain other capital items may also be disregarded in calculating your capital, but for the purposes of completing this form you should only exclude those items mentioned above. If you are in any doubt about whether a property or other capital items falls into one of these categories you should include it and provide full details so that the Council can decide whether or not it can be disregarded.

53. Give the exact address of each flat (e.g. Flat C, 25 Anystreet).

54. If you are not sure of the type of tenancy or occupancy (for example whether it is an assured tenancy, protected tenancy or statutory tenancy) you should check this with the Council or with your own legal advisers, solicitor, Citizens Advice Bureau or a legal aid centre.

55. "Rent" includes ground rent for these purposes.

56. Give the weekly/monthly/quarterly/annual amount as appropriate.

57. Details given should include information about resources made available by the Diocesan Board of Finance, for example an extract from the annual budget of the Board. If you are not making this application as a representative of the Board, please give the address of the Board.

58. "Charity" does not include registered housing associations for grant purposes.

59. You should enclose a recent statement of accounts or annual report if available. In the case of glebe land, the Diocesan Board of Finance may provide details including an extract from the annual budget if appropriate.

60. A summary of the charity's trust deed or similar document, should be provided in addition to any other information. In the case of glebe land, please indicate if the property or part of the property is currently occupied rent free by a licensed minister or layworker.

61. The Council will normally ask for two estimates of the costs of works from different contractors; but they may require more or fewer than two estimates in any particular case. (See also note 8 above.) These estimates should normally be itemised.

62. The particulars of any preliminary or ancillary services and charges are for the services and charges identified in question 1.18 – see note 12 above. Please include estimates.

63. A common parts certificate specifies the interest that the applicant or each of the applicants has in the building, or in each flat in the building, and certifies that the required proportion, which is generally three-quarters of the flats in the building, is occupied by "occupying tenants". An "occupying tenant" is someone who has the required interest in a flat in the building, and occupies the flat as his or her only or main residence.

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FORM 4 APPLICATION FOR HMO GRANT

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FORM 4

APPLICATION FOR HMO GRANT

(Name and address of Council)

THIS IS THE APPLICATION FORM TO USE IF YOU WANT TO APPLY FOR AN HMO GRANT, FOR CARRYING OUT WORKS OF IMPROVEMENT OR REPAIR ON A HOUSE IN MULTIPLE OCCUPATION (HMO), OR FOR CONVERTING A BUILDING INTO AN HMO. DIFFERENT FORMS SHOULD BE USED IF APPLYING FOR A RENOVATION GRANT (FORM 1), DISABLED FACILITIES GRANT (FORM 2), OR A COMMON PARTS GRANT (FORM 3). WHEN YOU HAVE COMPLETED THIS FORM, PLEASE SEND IT TO THE COUNCIL.

IF YOU ARE UNCERTAIN HOW TO ANSWER ANY OF THE QUESTIONS, PLEASE CONTACT:

(Name, address and telephone number of contact in the Council)

IMPORTANT

PLEASE READ THE FOLLOWING NOTES BEFORE STARTING THIS APPLICATION FORM

A. This form is in four parts:

- Part 1 – asks for information about the property and about the works you wish to carry out;
- Part 2 – asks for information about your interest in the property and about the way it is occupied;
- Part 3 – contains questions about rent etc., and, for some landlords, about financial resources;
- Part 4 – requires you to provide various enclosures with the application. You are also required to sign a declaration about the information you give in the application.

B. Your application will not be valid unless you complete all the relevant parts of this form and enclose the necessary documents required in Part 4.

C. All appearances of “you” and “your” in this application form are to be treated as references to the grant applicant.

D. The references to notes in the forms are to the numbered notes at the end of the form.

E. HMO grant is not available on any property which is less than 10 years old, or which was converted less than 10 years ago.

F. If you have a mortgage you may find that the terms require your mortgagee’s consent to apply for a grant (or carry out works). Make sure that you have obtained any necessary permission before submitting an application.

G. A grant will not normally be paid if you, or anyone else acting on your behalf, commence works before you receive written approval of this application. Exceptions may be made where the works are required to comply with certain notices (e.g. those served under sections 189 or 190 of the Housing Act 1985). A grant will usually be refused if the works are completed before the application has been approved. Planning permission or building regulations approval is not the same as grant approval.

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ADDRESSES FOR CORRESPONDENCE

To be completed by all grant applicants

Your name:

Address for correspondence:

Note 1

Telephone number: (home)
(work)

Name, address and telephone number of the manager of the property (if different from the owner):

Name:

Address:

Telephone number:

If someone (e.g. a friend or an organisation) is handling this application on your behalf, give below the name, address and telephone number of the person to be contacted about this application:

Name:

Address:

Telephone number:

PART 1: INFORMATION ABOUT THE PROPERTY AND THE WORKS TO BE CARRIED OUT

Please answer all the questions in this Part unless directed elsewhere (e.g. "Go to 1.7"). Please read the notes indicated on the right hand side of the page before answering the questions to which they relate.

1.1 Address of the property at which works are to be carried out:

Note 2

1.2 Was the property—

(a) built more than 10 years ago?

Yes

or

No

Note 3

(b) converted more than 10 years ago?

Yes

No

Note 3

1.3 Have you made a previous application for any type of grant on this property?

Yes

No

(Go to 1.5)

1.4 Please give the date of your application and Council reference (if known):

Note 4

Date:

Reference:

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- 1.5 Do you know of any previous application for grant made by another person on this property? Yes
No (Go to 1.7)
- 1.6 Please give details (if known): **Note 5**
- 1.7 Have you or has anyone else been served with a notice under section 189, 190 or 352 of the Housing Act 1985? Yes
No **Note 6**
(Go to 1.9)
- 1.8 Please give details, including the date the notice was served:
- 1.9 Will the works to be carried out involve improvements and/or repairs to an existing IIMO? Yes (Go to 1.11)
No
- 1.10 Will the works to be carried out involve conversion of the property into an IIMO? Yes (Go to 1.18)
No **Note 7**

1.11 Please state what standard amenities are provided in the house and what amenities are to be added or replaced (if any) as a result of the proposed works:

	Number of amenities already in house	Number of amenities to be added including replacements
(a) A fixed bath or shower in a bathroom		
(b) A hot and cold water supply at a fixed bath or shower		
(c) A wash-hand basin		
(d) A hot and cold water supply at a wash-hand basin		
(e) A sink		
(f) A hot and cold water supply at a sink		
(g) A water closet		

- 1.12 Say what provision already exists in the property—
(a) to give warning in case of fire;
(b) to prevent the spread of fire;
(c) to aid escape from fire:
- 1.13 Will any of the works to be carried out come within one of the descriptions (a), (b) or (c) in question 1.12 above? Yes
No (Go to 1.17)
- 1.14 Please give details of the works now proposed **Note 8**
(a) to give warning in case of fire;
(b) to prevent the spread of fire;
(c) to aid escape from fire:
- 1.15 Has notice requiring any of these works to be carried out ever been served by the Fire Authority? Yes **Note 9**
No (Go to 1.17)
- 1.16 Please give details, including the date the notice was served:

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- 2.2 Do you (alone or jointly with others) own the freehold of the property or have a tenancy of the property with at least 5 years still to run? Yes (Go to 2.5)
No
- 2.3 Do you propose to acquire (either alone or jointly with others) such an interest in the property? Yes
No Note 14
- 2.4 When do you expect this to happen (give approximate date)?
.....
Note 15
- 2.5 How many households are there in total in the house?
.....
Note 16
- 2.6 Is any part of the property occupied as a self-contained dwelling by persons forming a single household? Yes Note 17
No (Go to 2.8)
- 2.7 How many such dwellings are there?
.....
- 2.8 How many individuals are there in total in the house?
.....
- 2.9 Has a direction under section 354 of the Housing Act 1985 been given on the property, specifying the maximum number of individuals or households who should occupy the property? Yes
No (Go to 2.11)
- 2.10 Please give details, including the date on which the direction was given:
- 2.11 Has an overcrowding notice under section 358 of the Housing Act 1985 been served on the property, specifying in relation to rooms in the property the maximum number of persons by whom each room is suitable to be occupied as sleeping accommodation? Yes
No (Go to 2.13)
- 2.12 Please give details, including the date the notice was served:
- 2.13 Have you given an undertaking under section 368 of the Housing Act 1985, which has been accepted by the Council, that part of the house will not be used for human habitation? Yes
No (Go to Part 3)
- 2.14 Please give details, including the date on which the undertaking was accepted:

NOW GO TO PART 3

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PART 3: FINANCIAL INFORMATION REQUIRED OF LANDLORDS AND CHARITIES, AND IN RESPECT OF ECCLESIASTICAL PROPERTY

Please answer each question in turn unless directed elsewhere.

- 3.1 Is the application made in respect of the residence house of an ecclesiastical benefice? Yes No (Go to 3.5)
- 3.2 Please give details of any financial resources available to you: **Note 18**
- 3.3 Please give details and supply any other information as to your circumstances which may be relevant to your application:
- 3.4 Is the residence house currently let? Yes (Go to 3.14) No (Go to Part 4)
- 3.5 Are you applying as a charity, or is the application in respect of glebe land? Yes **Note 13** No (Go to 3.13)
- 3.6 Are you under any obligation, or is it your practice, to let accommodation at a rent or for a licence fee which is less than a market rent or licence fee? Yes No (Go to 3.8)
- 3.7 Please give details: **Note 19**
- 3.8 Are any financial resources available to you in addition to the rent or licence fee from the property? Yes No (Go to 3.10)
- 3.9 Please give details:
- 3.10 Are you under any obligation, or is it your practice, to dispose of properties improved or provided by conversion by you within a period of five years of carrying out those works? Yes No (Go to 3.12)
- 3.11 Please give details:
- 3.12 Please supply any other relevant information as to your circumstances: **Note 20**
- 3.13 Is all or part of the property currently let or licensed for use as a residence? Yes No (Go to Part 4)
- 3.14 Please give the following details of each letting or licence (continue on a separate sheet if necessary):
- (a) Type of letting or licence: **Note 21**
- (b) Current rent or licence fee: £ per
- (c) If the tenancy/licence is for a fixed term, the date this term will expire:
-
- (d) Does the rent or licence fee include the following: Tick box
- (i) water charges
- (ii) board
- (iii) furniture
- (iv) other services (give details)

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(e) Please give any details about the tenancy/licence which are relevant to your application (including any terms of the tenancy or licence):

Note 23

NOW GO TO PART 4

PART 4

Enclosures	Tick as enclosed	
A. Two estimates from different contractors of the cost of carrying out the works (unless otherwise instructed by the Council).	<input type="checkbox"/>	Note 23
B. Particulars of any preliminary or ancillary services and charges.	<input type="checkbox"/>	Note 24
C. An HMO certificate.	<input type="checkbox"/>	Notes 25 and 26

DECLARATION

WARNING: IF YOU KNOWINGLY MAKE A FALSE STATEMENT YOU MAY BE LIABLE TO PROSECUTION

I declare that to the best of my knowledge, information and belief the information in this application is correct.

Signature:..... Date:

NOTES

1. If the applicant is a company or similar body, give the official (registered) address.
2. The questions in the remainder of this form relate to the property mentioned here.
3. If the property was built or converted less than 10 years ago, it is not eligible for HMO grant.
4. If you have made more than one previous application, give details of all of them and of any contribution of which you have been notified under a group repair scheme. Previous grant approvals may affect the works for which a grant may be given, and also the amount of grant payable.
5. If you are aware of more than one previous grant application, give details of all of them and of any contribution of which you have been notified under a group repair scheme, if known. Previous grant approvals may affect the works for which a discretionary grant may be given.
6. Notices under sections 189, 190 or 352 of the Housing Act 1985 may be served on either the person having control of the house, or on the person managing the house.
7. If you have answered "No" to both questions 1.9 and 1.10 you should not be applying for an HMO grant. Please reconsider your answers. If you cannot answer "Yes" to one of these questions, do not proceed any further with this application.
8. Give as full a description as you can of the proposed works. It will help you to supply plans and in the case of works of improvement or conversion these should be of the property before and after the works have been carried out.
9. If notices have been served by the Fire Authority (under the Fire Precautions Act 1971 or other legislation), it is possible that your property would not qualify for HMO grant. You should check this with the Council.

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10. Planning permission or building regulations approval may or may not be required. If you are not sure whether permission or approval is required, contact the relevant department of the Council. Where permission or approval has already been obtained, please enclose a copy with your application.

11. If you carry out the works yourself, or if they are carried out by a member of your family, you may be unable to give an invoice, demand or receipt for the works which would be acceptable to the Council for the purpose of payment of grant. Please clarify this point with the Council.

12. Examples of preliminary or ancillary services and charges which may be included in a grant application are: technical and structural surveys; design and preparation of plans and drawings and preparation of schedules of works; obtaining of estimates; applications for building regulations approval and planning permission; supervision of the works; disconnection and reconnection of electricity, gas, water and drainage utilities made necessary by the works (but not charges arising from non-payment of bills); advice on contracts and on financing the cost of the works, including such services given by home improvement agencies. The Council can give full details of what services and charges are eligible.

13. "Charity" does not include registered housing associations for grant purposes.

14. If you have answered "No" to questions 2.2 and 2.3 you are not eligible to apply for HMO grant. Please reconsider your answers. If you cannot answer "Yes" to one of these questions, do not proceed any further with this application.

15. If you have exchanged contracts on a purchase, give the date that the purchase is to be completed. The Council cannot approve this grant application until you actually have the required interest.

16. Examples of what may constitute a "household" for these purposes are someone living on his or her own or persons living together as a family (whether or not they are related).

17. If you are not sure whether the accommodation counts as a separate dwelling you should check this with the Council.

18. Details given may include information about resources made available by the Diocesan Board of Finance, for example an extract from the annual budget of the Board. If you are not making this application as a representative of the Board, please give the address of the Board.

19. A recent statement of accounts or annual report may be enclosed if appropriate. In the case of glebe land, the Diocesan Board of Finance may provide details including an extract from the annual budget if appropriate.

20. A summary of the charity's trust deed, or similar document, should be provided in addition to any other information. In the case of glebe land, please indicate if the property or part of the property is currently occupied rent free by a licensed minister or layworker.

21. If you are unsure how to describe the type of tenancy or licence (for example whether it is an assured tenancy, protected tenancy or statutory tenancy) you should check this with the Council or with your own legal advisers, solicitor, Citizen's Advice Bureau or a legal advice centre.

22. Examples include any repairs for which the tenant or licensee is responsible.

23. The Council will normally ask for two estimates of the costs of works, from different contractors, but they may require more or fewer than two estimates in any particular case. (See also note 8 above).

24. The particulars of any preliminary or ancillary services and charges are for the services and charges identified in question 1.30—see note 12 above. Please include estimates.

25. An HMO certificate certifies that the applicant has, or proposes to acquire, an owner's interest in the building and that he or she intends to let or license the use of part of it (or already has let or licensed part of it) as a residence, to someone other than a member of his or her family, for a period of not less than five years beginning on the certified date, on a tenancy which is not a long tenancy. The "certified date" is the date certified by the Council as the date on which the grant-aided works are completed to their satisfaction.

26. Having an "owner's interest" means owning the freehold of the property, or having a tenancy of which not less than 5 years remains unexpired at the date of the application, whether alone or jointly with others.

SCHEDULE 2

Regulation 5

REVOCATIONS

<i>Regulations revoked</i>	<i>References</i>
The Housing Renovation etc. Grants (Prescribed Forms and Particulars) Regulations 1990	S.I. 1990/1236
The Housing Renovation etc. Grants (Prescribed Forms and Particulars) (Amendment) Regulations 1991	S.I. 1991/898
The Housing Renovation etc. Grants (Prescribed Forms and Particulars) (Amendment) Regulations 1992	S.I. 1992/562
The Housing Renovation etc. Grants (Prescribed Forms and Particulars) (Amendments) Regulations 1993	S.I. 1993/552
The Housing Renovation etc. Grants (Prescribed Forms and Particulars) (Amendment) (No.2) Regulations 1993	S.I. 1993/1452

EXPLANATORY NOTE*(This note is not part of the Regulations)*

These Regulations prescribe forms of application for grants under Part VIII of the Local Government and Housing Act 1989 (grants towards cost of improvements and repairs etc.). They also prescribe particulars to be contained in applications. Form 1 is to be used for applications for renovation grants. Form 2 is to be used for applications for disabled facilities grants. Form 3 is to be used for applications for common parts grants. Form 4 is to be used for applications for HMO grants, which are grants relating to houses in multiple occupation.

These Regulations consolidate, with modifications, the Housing Renovation etc. Grants (Prescribed Forms and Particulars) Regulations 1990 and the amending regulations listed in Schedule 2. In addition to minor and drafting amendments, they make changes consequential upon changes made by the Housing Renovation etc. Grants (Reduction of Grant) Regulations 1994 (S.I. [1994/648](#)).

By regulation 6, these Regulations do not apply to applications made before 4th April 1994, the date on which these Regulations come into force.