

SCHEDULE 4

Regulation 5

APPLICATION FOR GRANT FOR A MEANS OF ESCAPE FROM FIRE IN A HOUSE IN MULTIPLE OCCUPATION

APPLICATION FOR GRANT FOR A MEANS OF ESCAPE FROM FIRE IN A HOUSE IN MULTIPLE OCCUPATION

Please read these notes before completing this form. These notes are not a complete or authoritative statement of the law.

In this form and these notes "house" includes flats.

This form must be completed and returned to the local authority for the area where the house is situated. The local authority will tell you what documents you need to provide to show that the information you give is correct. They may also need to inspect the house to check that they can give grant for the works you plan to do.

YOU SHOULD NOT START THE WORK ON THE HOUSE BEFORE THE LOCAL AUTHORITY HAS APPROVED YOUR GRANT APPLICATION IN WRITING.

IF YOU START WORK BEFORE YOUR APPLICATION IS APPROVED, THE LOCAL AUTHORITY MAY NOT BE ABLE TO GIVE YOU A GRANT.

If grant is given, the following conditions apply to the house for 5 years after the work is completed.

- the house must be used as a private dwelling-house (although part may be used for business purposes);
- if the owner or a member of their family occupy the house, it must be their main home; and
- the house must be kept in good repair, as far as possible.

The conditions will be registered on the title of the house. If you are not the owner of the house, you should inform the owner of this application. If there are any loans secured on the house the lender should also be informed.

The amount of grant that may be paid usually depends on the income of the applicant and their partner over the past year. ("Partner" means someone you are married to, or someone who normally lives with you as if you are married.) If you are a joint owner, joint tenant or joint liferenter, the income of all the joint owners, joint tenants and joint liferenters, and of their partners, is also taken into account. You will need to collect information from all these people to fill in Part D of this form, and ask them to sign to confirm that the information about them is correct. You must tell them what the information is for, and which local authority you are sending this application to.

If the application relates to a house which is not your main home or the main home of a member of your family, or if the applicant is a company or organisation, the amount of grant depends on the cost of works compared to the increase in value of the house due to those works, and certain other criteria.

Leaflets are available to tell you more about the grants system and how the amount of grant is calculated.

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PART A - GENERAL

A1 Address of the house where work is to be done.
Please include the flat number, if applicable

| |
|----------|
| |
| |
| Postcode |

A2 Your details (the applicant)

| | |
|--------------------------------|---------------------|
| Name | |
| Address (if different from A1) | |
| | |
| Postcode | |
| Telephone (day) | Telephone (evening) |
| Telephone (mobile) | Email |

A3 Who owns the house where work is to be done?
If there are joint owners, please continue on a separate sheet if necessary

| | |
|-----------------|-----------|
| Owner's name | |
| Owner's address | |
| | |
| Postcode | Telephone |

A4 If you want someone else to deal with the application for you, please give their details.

| | |
|--------------------|---------------------|
| Name | |
| Address | |
| | |
| Postcode | |
| Telephone (day) | Telephone (evening) |
| Telephone (mobile) | Email |

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PART B - ABOUT THE HOUSE

B1 What sort of property is it? *Please tick one box.*

House: detached semi-detached terraced
Flat: tenement high-rise 4-in-a-block

Other - please describe _____

B2 Please give a brief description of the planned works.

B3 How much will these works cost?

| | |
|-------------------|----------|
| Cost of work | £ |
| VAT on work | £ |
| Professional fees | £ |
| VAT on fees | £ |
| Total | £ |

You will need to provide full specifications for the work and estimates of the costs, including professional fees. The local authority will tell you what is required.

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PART C - YOU AND THE HOUSE

For each question, please tick one box and follow the instructions alongside. If there are no instructions, go on to the next question.

C1 What is your connection with the house?
(Agricultural and crofting tenants are treated as owners for the purposes of grant. If this applies to you, please answer as if you were the owner.)

- The applicant is not an individual Please go to Part E
- I am an owner who currently occupies the house Please go to Part D
- I am an owner, but do not currently live in the house Please go to question C2a
- I am a liferenter Please go to question C3
- I am a tenant Please go to question C4a

Owners

C2a Does a member of your family currently live in the house?
Yes Please go to Part D No

C2b Do you or a member of your family intend to live in the house when the work is completed?
Yes Please go to Part D No Please go to Part E

Liferenters

C3 Is anyone else a joint liferenter with you?
No Please go to Part D Yes Please enter the names of all joint liferenters below, then go to Part D

| |
|--------------------|
| Joint liferenters: |
| |
| |

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Tenants

C4a Is anyone else a joint tenant with you?

No Yes Please enter the names of all joint tenants below

| |
|----------------|
| Joint tenants: |
| |
| |
| |

C4b Does your lease say that you are responsible for doing the works to which this application relates?

Yes No Please see the note below

C4c Have you had that lease for two years or more?

Yes Please go to Part D No Please see the note below

Note: If you have answered "No" to question C4b or C4c, you may not be eligible for a grant. Please contact the local authority to check the position before completing this application.

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PART D - INCOME

Fill in this Part if you or a member of your family live in the house, or intend to live there when the work is completed.

Fill in Part D for yourself and your partner, if you have one. If there are other joint owners, joint tenants or joint liferenters (other than your partner), you must also provide details of their income and their partners' income in Part D(Additional) and ask them to sign the form at Part F to confirm the information about them is correct. If you need more copies of Part D(Additional), please contact the local authority.

D - YOU AND YOUR PARTNER

D1 Do you have a partner who normally lives with you?
Please tick one box and follow the instructions alongside

Yes What is their partner's name?

Please include your partner's income and circumstances in completing this Part

No Please include only your own income in completing this Part

D2 Do you receive any of the following benefits?
Please answer "Yes" or "No" in each box

| | You | Your partner |
|-------------------------------------|-----|--------------|
| Income support | | |
| Income-based Jobseekers' Allowance | | |
| Guarantee element of Pension Credit | | |

Note: If you have answered "Yes" in any of these boxes, you do not need to answer any more questions in this Part. Please fill in Part D(Additional) for any joint owners, joint tenants or joint liferenters, and then go to Part F.

The following questions ask about your income and circumstances over the past year (the year ending with the date of this application). If the answer to any of the questions is "none", please write "none" in the box. The local authority will tell you what documents you need to provide to show that the information is correct.

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D3 How much did you receive in earnings from employment and/or self-employment over the past year?

Enter the gross amount, minus income tax and NI contributions

| | You | Your partner |
|-----------------|-----|--------------|
| Employment | £ | £ |
| Self-employment | £ | £ |

D4 How much did you pay over the past year in contributions to occupational pensions (deducted from your pay) or personal pensions, including stakeholder pensions and retirement annuities?

| | You | Your partner |
|--------------|-----|--------------|
| Occupational | £ | £ |
| Personal | £ | £ |

D5 How much income did you receive from savings and investments, including annuities, unit trusts, shares, etc. over the past year? *Include all interest paid to any accounts, net of tax, even if it was re-invested*

| | You | Your partner |
|-------------------------------------|-----|--------------|
| Income from savings and investments | £ | £ |

D6 How much did you receive over the past year from occupational pensions, personal pensions, annuities or state second pensions (S2P, or SERPS)? *Do not include Pension Credit, or any war pensions or war widows' pensions*

| | You | Your partner |
|----------------------|-----|--------------|
| Income from pensions | £ | £ |

D7 If you let any property to someone else, including letting rooms in your own home, what was the **net** taxable income from the letting over the past year? *Enter the amount after subtracting expenses which are deductible for income tax purposes*

| | You | Your partner |
|-------------------|-----|--------------|
| Income from rents | £ | £ |

D8 If you receive maintenance from anyone for your own support or to support a child you are responsible for, what was the total amount received over the past year? *Do not include benefit payments or any payments from a local authority for looking after a child placed with you for fostering or adoption*

| | You | Your partner |
|----------------------|-----|--------------|
| Maintenance payments | £ | £ |

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D9 If you receive Housing Benefit, what was the total amount received over the past year?

| | You | Your partner |
|-----------------|-----|--------------|
| Housing Benefit | £ | £ |

D10 How much did you pay in rent or mortgage payments over the past year, for your own home?
Include payments for any endowment policy or other investment or insurance products you are required to pay to stay in your home. Do not include other amounts for services, bills, additional insurance or council tax

| | You | Your partner |
|---------------|-----|--------------|
| Mortgage/rent | £ | £ |

D11 How much did you pay in rent or mortgage payments, as above, for any other house where a member of your family lives?
Only include payments which you are contractually required to make

| | You | Your partner |
|---------------|-----|--------------|
| Mortgage/rent | £ | £ |

D12a Were you or your partner responsible for any child under 16, or any young person between 16 and 21 and in full-time education, for any part of the past year?
Please tick one box and follow the instructions alongside

No Please go to question D13a

Yes Please complete the details below

D12b Please list the name and date of birth of each child or young person in the table below, and tick if they receive Disabled Living Allowance (DLA) or are registered blind. Continue on a separate sheet if necessary.

| Child/young person's name | Date of birth | DLA/blind |
|---------------------------|---------------|-----------|
| | | |

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D12c If the situation changed during the past year for any of the children listed in question D12b, please give details of the changes in the table below, showing the child or young person's name and the relevant dates.

| Name | U16/16-21 student | DLA/blind |
|-----------------------|-----------------------------|-----------------------------|
| <i>Eg: Mary Smith</i> | <i>2 Nov 02 - 27 Jun 03</i> | <i>2 Nov 02 - 27 Jun 03</i> |
| | | |
| | | |
| | | |

D13a Are you or your partner registered blind, or receive any of the benefits listed below? Please answer "Yes" or "No" in each box

| | You | Your partner |
|--|-----|--------------|
| Registered Blind | | |
| Disability Living Allowance | | |
| Disability element of Working Tax Credit | | |
| Disabled Person's Tax Credit | | |
| Severe Disablement Allowance | | |
| Incapacity Benefit | | |
| Mobility Supplement | | |
| Attendance Allowance | | |
| Other similar benefit: please specify | | |

D13b If you or your partner received any of these benefits for only part of the year, please say which benefits, and the dates when you started and/or stopped receiving them. You do not need to say if you stopped receiving a benefit because you passed the maximum age limit or went into hospital. In this case, you will be treated as if you still receive it.

| Benefit | Date started | Date stopped |
|---------|--------------|--------------|
| | | |
| | | |
| | | |

If there are other joint owners/joint tenants/joint liferenters, (other than your partner) you must fill in a copy of Part D(Additional) for each of them and attach it to the form here.

You should ask each person whose details are included on the form to sign at

**Part F to confirm the information about them is correct.
When you have completed Part D, please go to Part F.**

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PART D(ADDITIONAL) - INCOME OF OTHER RELEVANT PERSONS

You must provide details of the income and circumstances of every person who is a joint owner/joint tenant/joint liferenter, and their partners. Fill in one copy of this Part for each such person with their partner, if they have one, and ask them to sign the form at Part F to confirm the information about them is correct.

D(A)1a Please give the name of the person who is a joint owner/joint tenant/ joint liferenter whose details are given in this Part.

D(A)1b Do they have a partner who normally lives with them?
Please tick one box and follow the instructions alongside

Yes What is their partner's name?

Please include the income and circumstances of the person's partner in completing this Part

No Please include only the income and circumstances of the joint owner/joint tenant/joint liferenter in completing this Part

D(A)2 Does the person (or their partner) receive any of the following benefits? Please answer "Yes" or "No" in each box

| | Person | Partner |
|-------------------------------------|--------|---------|
| Income support | | |
| Income-based Jobseekers' Allowance | | |
| Guarantee element of Pension Credit | | |

Note: If you have answered "Yes" in any of these boxes, you do not need to answer any more questions in this Part. Please make sure you have filled in a copy of Part D(Additional) for each joint owner, joint tenant or joint liferenter, and then go to Part F.

The following questions ask about the person's income and circumstances over the past year (the year ending with the date of this application). If the answer to any of the questions is "none", please write "none" in the box. The local authority will tell you what documents you need to provide to show that the information is correct.

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D(A)3 How much did this person (and their partner) receive in earnings from employment and/or self-employment over the past year?

Enter the gross amount, minus income tax and NI contributions

| | Person | Partner |
|-----------------|--------|---------|
| Employment | £ | £ |
| Self-employment | £ | £ |

D(A)4 How much did this person (and their partner) pay over the past year in contributions to occupational pensions (deducted from their pay) or personal pensions, including stakeholder pensions and retirement annuities?

| | Person | Partner |
|--------------|--------|---------|
| Occupational | £ | £ |
| Personal | £ | £ |

D(A)5 How much income did this person (and their partner) receive from savings and investments, including annuities, unit trusts, shares, etc. over the past year? *Include all interest paid to any accounts, net of tax, even if it was re-invested*

| | Person | Partner |
|-------------------------------------|--------|---------|
| Income from savings and investments | £ | £ |

D(A)6 How much did this person (and their partner) receive over the past year from occupational pensions, personal pensions, annuities or state second pensions (S2P, or SERPS)?

Do not include Pension Credit, or any war pensions or war widows' pensions

| | Person | Partner |
|----------------------|--------|---------|
| Income from pensions | £ | £ |

D(A)7 If this person (or their partner) let any property to someone else, including letting rooms in their own home, what was the **net** taxable income from the letting over the past year?

Enter the amount after subtracting expenses which are deductible for income tax purposes

| | Person | Partner |
|-------------------|--------|---------|
| Income from rents | £ | £ |

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D(A)8 If this person (or their partner) receives maintenance from anyone for their own support or to support a child they are responsible for, what was the total amount received over the past year?

Do not include benefit payments or any payments from a local authority for looking after a child placed with them for fostering or adoption

| | Person | Partner |
|----------------------|--------|---------|
| Maintenance payments | £ | £ |

D(A)9 If this person (or their partner) receives Housing Benefit, what was the total amount received over the past year?

| | Person | Partner |
|-----------------|--------|---------|
| Housing Benefit | £ | £ |

D(A)10 How much did this person (and their partner) pay in rent or mortgage payments over the past year, for their own home? *Include payments for any endowment policy or other investment or insurance products they are required to pay to stay in their home. Do not include other amounts for services, bills, additional insurance or council tax*

| | Person | Partner |
|---------------|--------|---------|
| Mortgage/rent | £ | £ |

D(A)11 How much did this person (and their partner) pay in rent or mortgage payments, as above, for any other house where a member of their family lives? *Only include payments which this person (or their partner) is contractually required to make*

| | Person | Partner |
|---------------|--------|---------|
| Mortgage/rent | £ | £ |

D(A)12a Was this person (or their partner) responsible for any child under 16, or any young person between 16 and 21 and in full-time education, for any part of the past year?

Please tick one box and follow the instructions alongside

No Please go to question D(A)13a

Yes Please complete the details below

D(A)12b Please list the name and date of birth of each child or young person in the table below, and tick if they receive Disabled Living Allowance (DLA) or are registered blind. Continue on a separate sheet if necessary.

| Child/young person's name | Date of birth | DLA/blind |
|---------------------------|---------------|-----------|
| | | |

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D(A)12c If the situation changed for any of these children during the year, please give details of the changes in the table below, showing the child or young person's name and the relevant dates.

| Name | U16/16-21 student | DLA/blind |
|-----------------------|-----------------------------|-----------------------------|
| <i>Eg: Mary Smith</i> | <i>2 Nov 02 - 27 Jun 03</i> | <i>2 Nov 02 - 27 Jun 03</i> |
| | | |
| | | |

D(A)13a Is this person (or their partner) registered blind, or do they receive any of the benefits listed below? Please answer "Yes" or "No" in each box

| | Person | Partner |
|---------------------------------------|--------|---------|
| Registered Blind | | |
| Disability Living Allowance | | |
| Disabled Person's Tax Credit | | |
| Incapacity Benefit | | |
| Attendance Allowance | | |
| Mobility Supplement | | |
| Other similar benefit: please specify | | |

D(A)13b If this person (or their partner) received any of these benefits for only part of the year, please say which benefits, and the dates when they started and/or stopped receiving them. You do not need to say if they stopped receiving a benefit because they passed the maximum age limit or went into hospital. In this case, they will be treated as if they still receive it.

| Benefit | Date started | Date stopped |
|---------|--------------|--------------|
| | | |
| | | |

Please attach this Part D(Additional) inside the main form at the end of Part D. When you have completed Part D for all joint owners/joint tenants/joint liferenters, please go to Part F.

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PART E - ADDITIONAL CRITERIA

Only complete this Part if neither you nor any member of your family live in the house, or if the application is from a company or other organisation. The local authority will need to obtain a valuation of the house to calculate the amount of grant they may be able to pay.

E1 Does this application relate to a house which has been vacant for 2 years or more?

Please tick one box

Yes No

E2 Are the works to be undertaken under a single contract which covers a similar programme of works on three or more houses?

Please tick one box

Yes No

E3 Will the works make it easier for disabled people to enter and move around the house and operate fittings, services and controls, to a level beyond that required by the Building Standards (Scotland) Regulations 1990?

Please tick one box

Yes No

If the applicant is a company or organisation is it:

E4a A Registered Social Landlord?

Please tick one box

Yes No

E4b A charity or not-for-profit organisation which includes among its powers and objects the provision, construction, improvement, repair or management of houses for letting, for sale or for shared ownership?

Please tick one box

Yes No

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PART F - DECLARATIONS

The following declaration should be signed by your partner (if any), every joint owner/joint tenant/joint liferenter, and their partners.

You (the applicant) should sign the declaration at the bottom of the page.

I declare that the information given in this form as it relates to me is correct to the knowledge.

Signed _____ Date _____

Print name _____

Signed _____ Date _____

Print name _____

Signed _____ Date _____

Print name _____

This is my application for a grant towards the cost of works described in this form.

I declare that all the information given in this form is correct to the best of my knowledge and I confirm that I have advised each person providing information of the identity of the local authority to whom the information is being given to, and what the information will be used for.

Signed _____ Date _____

Print name _____

Anyone who knowingly or recklessly gives false information in an application for grant is committing an offence which could lead to prosecution.