

Lingfield United Trust

Financial Information

Each applicant to compete their own form

Your Name:

To enable the Trustees to assess your application, please provide the following information. Answer all questions. Enter "Nil" where appropriate.

	AMOUNT £	State whether per week/ 4 weeks/ Monthly/ Yearly
PENSIONS		
State Retirement Pension		
Widow's Pension/ Allowance		
Industrial Injuries Disablement Benefit		
War Disablement Pension		
War Widow's Pension		
Superannuation		
Pensions from former employers		
Private pensions		
Pension from late partners employment		
Pension Credit		
Any other Pension		
ALLOWANCES		
Attendance Allowance		
Mobility Allowance		
Carer's Allowance		
Severe Disablement Allowance		
Disability Living allowance		
Employment & Support Allowance		
Any other Allowances		
BENEFITS		
Incapacity Benefit		
Income Support		
Housing Benefit		
Council Tax Benefit		
Universal Credit		
Any other Benefits		

	Amount £	Week/month/year
OTHER		
Maintenance Received by Yourself		
Voluntary or Charitable payments received		
Rental from any property		
Employment – salary from current employment		
Any other income – give details		

SAVINGS AND CAPITAL

To enable the Trustees to assess your application, please provide the following information. Net Income Please answer all questions. Enter “Nil” where appropriate

HELD IN YOUR OWN NAME	Amount £
Bank Accounts - current	
Bank Accounts - savings	
Post Office Accounts	
Building Society Accounts	
National Savings Certificates (& date bought)	
Premium Bonds	
Redundancy Payment (if in last 12 months)	
Cash – includes any cash held at home	
Any other capital – give details	
Stocks/shares/unit trusts – give current value or state name of companies and list on a separate piece of paper	
Any other capital – give details	

HELD JOINTLY WITH OTHER APPLICANT	Amount £
Bank Accounts – current	
Bank Accounts – savings	
Post Office Accounts	
Building Society Accounts	
Any other capital – give details	

PRESENT ACCMOMODATION

Do you own your own accommodation?	YES / NO
If yes what is the current estimated value of the property?	£
Please give a simple description of the property you own.	
Do you still need to repay on a mortgage associated with this property?	YES / No
If YES how much	£
If you own any other property, other than where you live now, please provide details	Address: Current Value £ Mortgage £

LIABILITIES AND OUTSTANDING DEBTS:

Details of Debt	Amount Owed £

CERTIFICATION

I certify that the details above are correct to the best of my knowledge and belief and that this application is submitted in good faith. I understand that it is my duty to inform the Trustees of any changes in my circumstances at any time, and that providing false information may place my appointment in jeopardy in the future.

Signature:.....

Print name:.....

Date:.....

Data Protection Statement: it is part of the Trustees’ responsibilities to ensure that applicants for almshouses are suitably qualified under the terms of the charity’s governing document. Trustees, therefore, need to investigate the personal circumstances of applicants. The personal data supplied on this form and other information relating to an almshouse appointment will be held on file. Some details may be checked with relevant organizations but none will be disclosed for any inappropriate purpose.

Please return with your application form to:

Anna Baker

Clerk to the Trustees

Lingfield United Trust

Address: 17 Headland Way, Lingfield RH7 6DH

Email: annabaker256@btinternet.com