

## DISABLED FACILITIES ENQUIRY FORM

Please complete this form and return it to us. It will help us to decide whether you may be eligible for a grant and, if so, how much you may have to pay towards the cost of the works. Please be as accurate as possible now and complete all of the form even if the answers are nil.

### IMPORTANT

This is an enquiry form not a formal application form. If you are eligible to apply for a grant you will need to complete an additional application.

**DO NOT COMMENCE ANY WORK BEFORE RECEIVING A FORMAL WRITTEN APPROVAL AS WE CANNOT PAY GRANT FOR WORKS WHICH HAVE ALREADY BEEN COMPLETED**

<b>Applicants Name:</b>		<b>Mr/Mrs/Miss/Ms/Other</b>	
<b>Date of birth:</b>		<b>Age:</b>	
<b>Telephone Numbers:</b>	<b>Home:</b> <b>Mobile:</b>	<b>Work:</b>	
<b>Partners Name:</b>		<b>Mr/Mrs/Miss/Ms/Other</b>	
<b>Date of Birth:</b>		<b>Age:</b>	
<b>Disabled persons name</b> (if different from above)		<b>Mr/Mrs/Miss/Ms/Other</b>	
<b>Date of Birth:</b>		<b>Age:</b>	
<b>Council Tax Billing Number:</b>			
<b>Address of property (Where intended works are to be carried out)</b>			
<b>Postcode:</b>			
<b>Correspondence address (if different from above)</b>			
<b>Postcode:</b>			
<b>Are you?</b>	<b>Owner Occupier</b>		<b>Prospective Owner</b>
	<b>Tenant</b>		<b>Landlord</b>
<b>Have you received a previous grant on this or any other property?</b>			<b>Yes / No</b>
<b>If yes please give details;</b>			
<b>Please supply brief details of the work you wish to carry out;</b>			
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**CHILDREN OR OTHER PERSONS, LIVING OR INTENDING TO LIVE IN THE PROPERTY**

Full Name	Relationship to Proposed Applicant	Date Of Birth	In Full-Time Education ✓	Is the person disabled
				Yes/No
				Yes/No
				Yes/No
				Yes/No
				Yes/No
				Yes/No

Are you or your partner: -

A full-time student	YES		NO	
Self-employed	YES		NO	

Please note - the financial information which follows should relate to the disabled person and their partner, if any.

**IF THE DISABLED PERSON IS A DEPENDENT CHILD OR IN RECEIPT OF ANY OF THE FOLLOWING BENEFITS YOU DO NOT NEED TO COMPLETE THE REST OF THE FORM EXCEPT TO SIGN AND DATE IT ON PAGE 3.**

- Income support
- Income based job seekers allowance
- Pension guarantee credit
- Council Tax Benefit (means tested)
- Housing Benefit
- Working Tax Credit based on income under £15,050
- Child Tax Credit based on income under £15,050

	Applicant	Partner	Child
Attendance Allowance			
Incapacity Benefit			
Severe Disablement Allowance			
Carers Allowance			
Disability Living Allowance (Care Component)	HIGH/MIDDLE/LOW please circle	HIGH/MIDDLE/LOW please circle	HIGH/MIDDLE/LOW please circle
Disability Living Allowance (Mobility Component)			
War disablement pension (please enclose details or a copy of breakdown)			
Industrial injuries disablement benefit			

<b><u>EARNED INCOME</u> - TO INCLUDE OVERTIME AND BONUS ETC.</b>		APPLICANT/ DISABLED PERSON	PARTNER
NATIONAL INSURANCE NUMBER:			
Gross Income (earned)	Per week/month/year	£	£
Income Tax paid	Per week/month/year	£	£

<b>National Insurance Paid</b>	Per week/month/year	£	£
<b>Pension contributions Paid</b>	Per week/month/year	£	£
<b>NO OF HOURS WORKED</b>	Per week/month/year		

### **OTHER INCOME**

<b>State pension (includes pension credit)</b>	Per week/month/year	£	£
<b>Private Pension</b>	Per week/month/year	£	£
<b>Working/Child Tax Credit</b>	Per year	£	£
<b>Incapacity Benefit/severe Disablement Allowance</b>	Per week/month/year	£	£
<b>Payment from any tenants, or lodgers or for childminding</b>	Per week/month/year	£	£
<b>Job seekers allowance (Contributory)</b>	Per week month/year	£	£
<b>Carers Allowance</b>	Per week/month/year	£	£
<b>Disability Living Allowance</b>	Per week/month/year	£	£
<b>Attendance Allowance</b>	Per week/month/year	£	£
<b>Any other income (Including Child Benefit)</b>	Per week/month/year	£	£
<b>Tax on other income</b>	Per week/month/year	£	£

### **OUTGOINGS**

<b>Contribution to student Grants</b>	Per week/ month/year	£	£
<b>Registered Childminder Costs</b>	Per week/ month/year	£	£

### **SAVINGS AND CAPITAL**

<b>State value of all capital and savings held. Includes bank &amp; building society accounts, savings certificates, stocks, shares, premium bonds, investments etc.</b>	<b>Details</b>	<b>Applicant/disabled Person Amount</b>	<b>Partner Amount</b>

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

**YES / NO**

**Details please:**

**IF THE PROPOSED APPLICANT OR PARTNER IS A FULL-TIME STUDENT PLEASE ALSO GIVE DETAILS REQUESTED BELOW, FOR THE CURRENT YEAR:**

<b>Grant Income</b>	£
<b>Assessed Contribution of Parent / Guardian</b>	£

<b>Other Income Amount</b>	<b>£</b>
<b>Source</b>	

<b>SIGNATURE OF PROPOSED APPLICANT:</b>	<b>DATE:</b>
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**PLEASE RETURN TO:- Private Sector Housing, Room G40, South Gloucestershire Council, Community Care & Housing, The Civic Centre, High Street, Kingswood, Bristol, BS15 9TR**

**NIL APPROVALS**

Unless you are in receipt of the specified benefits or unless the works are for a disabled child, grant applicants are subject to a test of financial resources. This test shows the contribution that you should make towards the cost of the works. The contribution is based on an assessment of your income and capital. In some cases this contribution will exceed the cost of the works required and you will not receive any grant. It may, however still be worthwhile to continue with an application to receive a **NIL** approval. This would require you to submit a formal application, obtain a nil approval and then complete the works at your own expense, to the Councils satisfaction. The advantage of this process is that your contribution can then be deducted from any contribution that you may be assessed to make in any future application. This is particularly relevant for disabled adaptations as applicants may require a series of adaptations over a period of years. The ability to deduct contributions applies for 10 years in the case of owner occupation and 5 years for tenanted properties. If you require any further information on this matter please ask a member of the grants section.

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**Grant Policy Summary**

**Housing Grants Construction and Regeneration Act 1996**  
**and Regulatory Reform (Housing Assistance) Order 2002**  
**policies adopted by South Gloucestershire Council**

Mandatory disabled facilities grants are available under the Housing Grants Construction and Regeneration Act 1996 and discretionary assistance is available under the Regulatory Reform Order.

Assistance is subject to a maximum of £30,000 and is means tested to determine whether applicants have to make a contribution towards the cost of works. Assistance in excess of the maximum will be subject to consideration by the Councils Disabled Facilities Grant Panel (loans of up to £15,000 may be available).

In deciding what works will be considered for grant the department needs to consult with the Councils Occupational Therapy Service which will advise on the adaptations which are necessary and appropriate to meet the needs of the disabled person. The department will normally consult the Occupational Therapist on your behalf, although if you wish to make your own approach you may do so by phoning 01454 868007 during normal office hours.

## **General provision**

While the Council has adopted the above mentioned policies in order to ensure the most appropriate use of available grant funds, it recognises that there may be applications which fall outside these policies but which have a strong case based on need. These will be reported to the Executive for consideration. It must be stressed, however, that approvals in such cases will only be given in exceptional circumstances.

## **Complaints procedure**

If you are unhappy with the service you receive in respect of your grant enquiry, or any other service provided by the Council then the Council has a complaints procedure. This is explained in the booklet 'Help Us To Get It Right' which is available from all Council Offices.

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## **NOTE:**

This document is a summary only of the grant policy adopted by the Council.

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**Private Sector Housing, Room G40, South Gloucestershire Council, Community Care & Housing, The Civic Centre, High Street, Kingswood, Bristol, BS15 9TR, Tel: 01454 868126.**