



Registered Charity Number 215415

The Davenport Homes

30 Bentley Heath Cottages
Tilehouse Green Lane
Knowle, Solihull. B93 9EL
Telephone 01564 773407

Email contact@davenportalmshouses.org.uk
Web site www.davenportalmshouses.org.uk

Application form for an Almshouse at Bentley Heath Cottages

Section 1 – About You

Full nameMr/Mrs/Miss/Ms.....

Address

.....

.....

.....Post Code.....

Telephone NoMobile Number

Length of time at this address.....Council Tax Band.....

Date of Birth Age Marital status.....

Place of birth.....Do you have the right to remain in the UK? YES/NO

Email address.....Do you own a car? YES/NO

Employment History: Please give details of any occupations you have followed and for how long. Any present occupations should be included:

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Section 2 – About your Family

Next of kin.....

Relationship

Address

.....

.....

.....Post code

Telephone NoMobile Number

Section 3 – About your present home

Type of accommodation (e.g. 3 bedroom house, 2 room flat):

.....

Do you own it? Yes/No

If **'yes'**, what is its present estimated value? £.....

If you do not own the property where you currently live, who does own this property?

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Is this person related to you in any way? If **YES** what is the relationship?

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If rented, please give name and address of landlord:

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Current rent £.....per week

Do you receive Housing Benefit? Yes/No

Do you receive Council Tax Benefit? Yes/No

Why do you wish to leave your present accommodation?

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.....

What are your intentions regarding your current property if you are appointed to an almshouse?

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Is there a mortgage outstanding on the property and, if so, how much is outstanding? If there is no mortgage, please write NONE

.....

If you own property other than the one in which you live, please give details below. This should include property owned abroad as well as in the UK and properties owned/sold in the past 5 years.

Address

.....

.....Post Code

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Address

.....

.....Post Code

Section 4 – Your Income

To enable the trustees to assess your application, please provide the following information. This should include details of all sources of income and state how regularly you receive them, e.g. weekly, monthly or annually:

Please note: The trustees will ask to see bank/savings account statements for a 3 month period and your passport/birth certificate at interview stage.

	Amount	Frequency
Pensions 1. State retirement pension 2. Pension paid by a past employer 3. Private pension 4. Widow's pension 5. Any other pension		

Social Security Benefit 1. Pension Credit 2. Attendance Allowance 3. Any other benefits		
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Other Income 1. Annuities 2. Bank Deposit Account 3. Building Society Account 4. Investments/ISAs 5. Renting property or land that you own 6. Grants from a charity 7. Financial assistance from a relative/friend 8. From a trust fund 9. Any other income – please give details		
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Section 5 – Your Capital

1. Bank accounts Current Balance

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2. Building Society accounts Current Balance

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3. Shares Current Value

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4. National Savings Certificates

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5. Unit Trusts

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6. Premium Bonds

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Section 6 – About your Health and Social Factors

Are you able and willing to look after yourself and your accommodation?.....

Please give details of any significant illnesses, injuries or operations during the last five years

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Are there any other health or social factors that you would wish the trustees to take into consideration when assessing your application?
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.....

.....
Are you receiving continuing treatment for any of the above?
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.....

Name and address of your GP.....
.....Post Code.....

The charity may wish to write to your GP asking him to complete a medical certificate.

Do you have a conviction which is not spent under the Rehabilitation of Offenders Act 1974? YES / NO

If 'YES', please provide details:

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.....
.....

Section 7 – References

Please give the names and addresses of two responsible people (not relatives) who know you well and whom the charity may approach for a reference.

1..... 2.....
.....
.....

Post Code..... Post Code

Section 8 – Sponsors

Please give the names and addresses of two responsible people (usually relatives) who are prepared to act as your Sponsors. The main role of the sponsor is to help to maintain the resident's ability to live independently; and to help residents make alternative living arrangements when they are no longer able to live independently.

1..... 2.....
.....
.....

Post Code..... Post Code

Section 9 – Declaration

I have read the charity’s Trust Regulations and agree to abide by them should I be appointed to an almshouse.

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

I accept that if I am appointed as a resident I shall be a beneficiary of the charity and not a tenant. Any weekly sum I pay will be a maintenance contribution and not a rent.

I confirm that I am able to look after myself, with the assistance of family and social services if necessary

Signature:

Name:

(PLEASE PRINT NAME IN CAPITAL LETTERS)

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 or your care management will be held on file. Some details may be checked with relevant organisations but none will be disclosed for any inappropriate purpose. You may have access to your personal information on request.

I agree to the use of my personal information in accordance with the Data Protection Statement above:

Signature.....

Date.....

Please return your completed application to:

**The Trustees,
The Davenport Homes,
30 Bentley Heath Cottages,
Tilehouse Green Lane,
Knowle,
Solihull,
B93 9EL**