

2022-23 Affordable Warmth Grant Application Form

(to be completed by applicant)

Application no:

Name	Address		
Telephone number	Email address		
Secondary contact (if needed)			
Date of birth:	Age:	No of adults in household and no of children	
Ethnicity:		Gender:	
Is this property:			
Owned by you	Rented from a private landlord (name and contact details please)	Rented from a social landlord (which landlord)	Other (please explain)
Property type: e.g. detached, semi, bungalow etc			
Eligibility Criteria: Please state who in household meets the criteria			
People with diagnosed cardiovascular conditions			
People with diagnosed respiratory conditions			
People with diagnosed mental health conditions			
People with diagnosed disabilities			
Older people (65 and over) include date of birth			
Households with young children (up to age 5) include date of birth			
Pregnant women			

People with suppressed immune systems e.g. from cancer)	
People who have mobility issues and have attended hospital due to a fall.	
People who are terminally ill	
People who move in and out of homelessness, people with addictions, recent immigrants and refugees (with referral from a professional organisation only)	
People with other health issues, on referral from a professional organisation, or with approval from RVBC	
Number of hospital visits over the last 12 months:	Number of visits to GP over the last 12 months:

Income and Benefits

What is your annual household income?

Do you receive any means tested benefits?		(Tick all that apply)	
Tax Credits (Child Tax Credit and Working Tax Credit)	<input type="checkbox"/>	Pension Credit	<input type="checkbox"/>
Income-based Jobseeker's Allowance	<input type="checkbox"/>	Universal Credit	<input type="checkbox"/>
Income-related Employment and Support Allowance	<input type="checkbox"/>	Council Tax Support	<input type="checkbox"/>
Income Support	<input type="checkbox"/>	Housing Benefit	<input type="checkbox"/>

Please attach proof of income and also supporting information as to how you meet the eligibility criteria e.g. copy of prescription, hospital letter etc.

please continue onto the next page

Interventions**What affordable warmth help do you need? *****(Please tick)**

Boiler service

Boiler repair / replacement

Central heating system

Where request is for central heating:

Do you have central heating at the moment?

Yes No

Is the boiler broken down?

Yes No

How old is the boiler?

Electric storage heaters

Energy switching advice and help

*not all interventions will be carried out by Ribble Valley Council. Referrals may be made to partner organisations.

PLEASE NOTE: Work relating to the affordable warmth intervention should not be started before receiving approval of this application – retrospective payments will not be made. All works / advice relating to the grant will be provided by Ribble Valley Borough Council nominated contractors /partner organisations.

Applicant Declaration

Public funds must be protected and so the information you have provided on this form may be used to prevent and detect fraud. The information may also be shared for the same purposes, with other organisations which handle public funds.

I declare that that information I have given is correct and complete. I fully understand that if false information is given this will result in my application being cancelled or court proceedings possibly being taken to recover any grant payments.

I also give authorisation for the council to pass my details to partner organisations and to make checks with Housing Benefit on my behalf where necessary

Applicant Signature**Date****Print name**