

## HOW TO APPLY FOR HELP WITH YOUR ELECTRICITY AND GAS COSTS

Grants are available to help people living in GU15 & GU16 postcode areas.

You may qualify for help with your gas and electricity costs if any of these apply to you:

- You work part time or are on a low wage
- You receive state benefits
- You receive help with your rent or council tax
- Your children receive free school meals

Please complete both sides of the application form and return it with:

- **Evidence of income for yourself and everyone who lives with you, such as copies of recent pay slips, copies of recent bank or post office statements, or copies of DWP letters showing the amount of benefit received.**
- **A copy of a recent fuel bill, statement or letter from your fuel companies showing your name, address and account reference number and showing your estimated annual usage.**
- **A copy of your latest Housing Benefit calculation sheet showing how much rent and/or council tax you have to pay yourself and how much you receive in benefit.**

If you send original documents and want them returned, please write across the top of the application form, "please return" and enclose a stamped addressed envelope. Otherwise all documents will be shredded once we have processed your application. If your income is too high for you to receive a grant, your application cannot be considered by the Trustees. You will be told before the Trustees meet.

The Trustees meet to approve fuel grants once a year at the beginning of January and all the grant money approved will be sent to your fuel company at the end of January, for them to credit your account.



# FRIMLEY FUEL ALLOTMENTS

High Cross Church, Knoll Road  
Camberley, Surrey. GU15 3SY  
Tel: 07858 504640  
Email: ffa.office1@gmail.com

The Charity will call or write to you after the meeting to tell you the Trustees' decision and when the grant money will be transferred to your supplier.

If you have a pre-payment meter, one of our trustees will be in contact to arrange to meet you and top up the card with the grant.

The Trustees meet more regularly to approve other support grants such as essential household goods, carpets etc. If you do not enclose a letter of support from a support worker, who has personally confirmed the need, we will need to contact you to arrange a visit, to see how the Trustees may be able to help you.

- Please do not forget to send your supporting documents with your application form.
- Please make sure that you put the right amount of postage on the envelope.

**Please call 07858 504640 if you want more information or advice.**

Fuel grants are paid by:

**Frimley Fuel Allotments Charity**

**High Cross Church, Knoll Road. Camberley GU15 3SY**

Registered Charity no 1161717

**Keep this information sheet for reference.**



# FRIMLEY FUEL ALLOTMENTS

Charity No 1161717

# Grant Application Form

High Cross Church, Knoll Road, Camberley. GU15 3SY

Tel: 07858 504640 Email: ffa.office1@gmail.com

Client No:

**Part 1 - Please give your details below in CAPITAL LETTERS**

Title <i>(please circle)</i>	Mr Mrs Miss MS	Date of birth	
First name		Home tel no	
Surname		Mobile no	
Address			
Postcode		Email	
Single/married/living with partner/widowed			

Amount and Purpose of Grant Requested:

**Please list names and dates of birth of everyone else (including children) who live at the above address.**

Name in capital letters	Date of birth	Name in capital letters	Date of birth

**Please give details of your weekly income and your partner as well as everyone who live at this address:**

Type of income	Amount	Type of income	Amount
State Pension	£	Wage/Salary	£
State Pension <i>(Partner)</i>	£	Wage/Salary <i>(Partner)</i>	£
Private Pension	£	Tax Credits <i>(Working &amp; Child Tax)</i>	£
Pension Credit	£	Job Seekers Allowance	£
Attendance Allowance	£	Employment & Support Allowance	£
DLA Care / PIP daily living component	£	Child Benefit	£
DLA / PIP Mobility	£	Universal Credit	£
Carers Allowance	£	Other income	£
Income Support	£		

**You must provide proof of income eg benefit letters, bank statements, pay slips etc for everyone who lives at this address. Copies are acceptable. Full time students should provide a copy of their student status letter.**

Trustees cannot consider a grant unless you provide these documents.

Please enclose a stamped addressed envelope if you want these documents returned.

**Please turn over**

Does Housing Benefit / Universal Credit pay towards your rent? If so by how much?	£
Do you receive a Council Tax Reduction? If so by how much?	£

**You must provide a copy of your Housing Benefit decision letter, Universal Credit Statement or evidence of rent/mortgage paid.** If you do not send this, we cannot allow for these payments, so your grant may be lower.

Do you, or anyone who lives with you, have any savings above £6,000?	Yes / No
If Yes, please state total amount	£

**I confirm that the information I have provided, is correct to the best of my knowledge and I accept that you will need to share information with third parties such as but not limited to Citizens Advice, Housing Associations and Landlords, SHBC, Energy and Utility Providers I consent to you processing and storing my personal data in order for my application to be considered.**

Signature		Date	
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*Trustees cannot consider your application unless you have completed all the above parts of this form and enclosed documents giving details about the income of everyone living at your address.*

## **Part 2 - Authorising another person to talk to us on your behalf**

If you would like another person (e.g. a relative, friend or a support worker) to speak to the Frimley Fuel Allotment Charity on your behalf regarding your application, please fill in and sign the section below:

**I give the person named below permission to speak on my behalf to Frimley Fuel Allotments Charity about my application and give Frimley Fuel Allotment Charity permission to furnish the said person with the information they ask for. A note will be made on my file regarding this authorisation and I understand that this permission will be valid until I withdraw it in writing.**

Name of person you would like to authorise to speak on your behalf			
Their relationship to you			
Their contact number and email			
Signature		Date	