



Charity Office: 10 Fairfield Road ♦ Market Harborough ♦ Leicestershire ♦ LE16 9QQ
Telephone: 01858 419128 ♦ Email: admin@mhbcharity.co.uk
Registered Charity No. 1157787

Application for an Almshouse at Scotland End, Scotland Road, Market Harborough

The Market Harborough & The Bowdens Charity are able to provide Almshouses for persons considered to be in need and who meet the stated criteria, including being over sixty years of age and having lived in Market Harborough, Great Bowden or Little Bowden for at least two years at the time of this application.

Application Form

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 AgeMarital status.....

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, or your spouse/partner, own it? YES/NO
If 'yes', what is its present estimated value? £.....

If you do not own the property please provide the name of the owner?
.....

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

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 or your spouse/partner 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:

Address

.....

.....Post Code

If you are offered an Almshouse would you be willing to move in immediately, if not, please provide reasons?

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Section 4 – Your Income

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

	Amount	Frequency
Pensions <ol style="list-style-type: none"> 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 <ol style="list-style-type: none"> 1. Pension Credit 2. Attendance Allowance 3. Any other benefits 		
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Other Income <ol style="list-style-type: none"> 1. Annuities 2. Bank Deposit Account 3. Building Society Account 4. Investment 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

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

The Charity may wish to write to your GP asking him to complete a medical certificate. Please sign and return the enclosed form authorising your GP to provide us with medical information about you.

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 – Declaration

I understand the Charity's conditions of entry and believe that I am eligible to make this application.

I have read the Charity's Residents' Handbook and agree to abide by it 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' responsibility 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 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.

Please return your completed application to:

**The Charity Secretary/Steward
Market Harborough & The Bowdens Charity
10 Fairfield Road
Market Harborough
Leicestershire
LE16 9QQ**