Private and confidential

Home Energy Support Scheme

Application Form

cabe benevolent fund

*Offering **support** to our members and their dependants*

In response to the raising cost of home energy bills, the **CABE Benevolent Fund** has established the **Home Energy Support Scheme** to help relieve the financial pressures that some **CABE Members** may find themselves in.

About the Scheme:

The **Home Energy Support Scheme** is open to **all CABE Members** in the **UK** with **two years' paid membership**. Applicants who meet the criteria will be awarded a one-off grant of **£300**.

Support can only be offered to one CABE Member per household.

How to apply:

To apply fill in this application form and provide **supporting evidence** to prove that you meet the criteria listed below:

- your total household income is **£45,000 or less (excluding benefits)**; and
- your main residence is in the **UK**.

As part of your application you will be asked to declare your financial information including your income, savings and your fuel costs.

For full criteria and terms and conditions visit cbuilde.com/terms_and_conditions_HES

Member Details:

Name of Member:		Date of Birth:	
Member Grade:		Member No:	

Applicant Details:

Address:			
		Postcode:	
E-mail:		Telephone:	

Number of people in household earning income:	

Financial Information:

Please provide the following financial information in support of your application.

Household Income	£/month
Monthly income	
Monthly interest from bank and/or building society accounts	
Monthly dividends from stocks and shares	
Monthly rent from property that is let	
Possible expected income e.g. from a trust or under a will/probate	
Other (please specify)	
Household Capital	
Savings available to your household in bank or building society accounts	
Other savings including National Savings, PEPs, ISAs, bonds, others accounts or investments	

Home Energy Costs:

Please provide your monthly home energy costs.
These must relate to your primary dwelling.

Fuel costs	£/month
Electricity	
Gas	
Oil	
Other domestic fuel	

Supporting Evidence:

In support of your application you need to supply:

1. A copy of all your household bank, building society and investment statements for the previous six months.	
2. A copy of your home energy bills for the previous six months.	

Bank/Building Society Details:

Successful applications will be awarded a grant of **£300** which will be paid directly into your nominated bank or building society account.

Bank/Building Society:	
Name on Account:	
Sort Code:	
Account Number:	

Please Note: The **Trustees** reserve the right to request additional information. This form is only for the **Home Energy Support Scheme**, if you would like to apply for additional support from the **CABE Benevolent Fund** you need to make a formal request for support by filling out the **Benevolent Application Form** which can be found at cbuilde.com/benfund

Anxiety UK

Do you feel you are struggling with anxiety, stress or depression? Do you need to talk to someone? Working alongside Anxiety UK, we can support members struggling with anxiety, stress or anxiety-based depression.

Through the **CABE Benevolent Fund** this is a **free service** to **CABE members** who require well-being support. This will take the form of holistic well-being assessments, leading to a personalised treatment plan, which can include accessing psychological therapy services. If you apply for the **Anxiety UK** service, you do not need to complete the income and expenditure details below. However, these are still required if you are also applying for financial assistance.

Tick here **if you think you may benefit from this service:** ☐

Declaration of Information Provided:

I hereby declare that all the questions on this form have been fully and truthfully answered to the best of my ability and understanding.

I have read the **terms and conditions at cbuilde.com/page/terms_and_conditions_HES** and will undertake to inform the fund of change in my circumstances that might affect any decision by the Trustees to grant me an award.

I consent to the **CABE Benevolent Fund**, as data controller, processing the personal data relating to my application with the provisions of the **General Data Protection Regulations 2018** and where necessary sharing my details with other charitable organisations.

Please note: the information you supply will be held and processed confidentially. It will be passed to the fund's local representative if a visit to you is arranged.

Name: _____

Signature: _____ **Date:** _____

Typing out your name is sufficient for a digital signature.

Please send your completed form to emergencybenfund@cbuilde.com.

FOR TRUST USE ONLY	YES	NO	NOTES
Membership details confirmed	☐	☐	
Members known bank details confirmed	☐	☐	
Members known address confirmed	☐	☐	

	GRANT	YES	NO	COMMENTS	DATE	SIGNATURE
CABE Benevolent Fund's Chairman Comments:		☐	☐			
2nd CABE Benevolent Fund Trustee Name:		☐	☐			

Date of Payment:	
Payment Method:	BACS ☐ CHEQUE ☐
Cheque No.	

NOTES