



APPLICATION FORM

We can help people aged 50 or over who live (or have lived) in the Merseyside area, who are in financial hardship and who have worked in a professional or self-employed capacity (in a non-manual role), or in a supervisory, clerical or non-manual role in the past, or who are still currently in post.

We are looking to support eligible applicants who do not have the resources to pay for the normal things in life. We can do this through regular payments to support you to cope more easily with daily living expenses and/or through one off grants to help you to maintain your independence (eg equipment or home adaptations).

The Liverpool Merchants' Guild can offer:

- **Regular Payments to supplement income**
- **One Off Grants to pay for items of exceptional expenditure, equipment or adaptations to support independent living.**

OR a combination of both.

Are You Eligible?

The following eligibility criteria are laid down in The Liverpool Merchants' Guild's Charter – all applicants need to meet each of these:

Eligibility criteria

- An applicant must be aged 50 or over
- An applicant must either currently reside in Merseyside **or** have resided in Merseyside in the past for a continuous period of at least 15 year
- An applicant should have been a professional or self-employed person (in a non-manual role), a person who worked in a supervisory capacity, a clerical or a non-manual worker.

Data Protection Act 1988

The information requested on this form is required to enable us to administer the affairs of The Liverpool Merchants' Guild and comply with Charity legislation. It will not be disclosed to third parties without your consent.

ALL APPLICATIONS WILL BE TREATED IN THE STRICTEST OF CONFIDENCE

Please contact us if you have any queries about this application form or require further clarification, or indeed if you require a representative of the Secretaries to visit you at home to assist with completion:

The Secretaries, Monetta LLP, Chartered Accountants, 110-114 Duke Street, Liverpool L1 5AG
Tel: 0151 703 1080 email: info@liverpoolmerchantsguild.org.uk

SECTION 1: WHAT ARE YOU APPLYING FOR?	
1.1	Please choose the type(s) of support you are applying for from Liverpool Merchants' Guild: ☐ Regular Payment ☐ One Off Grant If you are applying for a REGULAR PAYMENT ONLY please complete all pages of this application form - EXCEPT FOR SECTION 5 If you are applying for a GRANT ONLY please complete all pages of this application form – INCLUDING SECTION 5 If you are applying for both a REGULAR PAYMENT AND A GRANT please complete all pages of this application form – INCLUDING SECTION 5 PLEASE NOTE YOUR APPLICATION WILL NOT BE PROCEEDED WITH IF YOU FAIL TO ANSWER ALL OF THE RELEVANT QUESTIONS ON THE APPLICATION FORM.
1.2	How did you hear about the Liverpool Merchants' Guild? ☐ Introduction via an advice/support org/intermediary who is assisting me to make this application – please go to 1.3 ☐ Internet/Search Engine – please go to 1.4 ☐ Word of Mouth – please go to 1.4 ☐ Other – please give details then go to 1.4
1.3	Organisation: Staff Name: Job Title: Staff Email: Phone Number: Do you wish to keep your intermediary up to date with your application progress? ☐ Yes, keep my intermediary up to date. ☐ No
1.4	How would you prefer us to make contact with you if we require further information when assessing your application? ☐ By Post ☐ By Email ☐ By Phone

Section 2: Your Personal Details

2.1	Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss
	First Name:
	Surname:
	Home Phone Number
	Mobile Phone Number
	Email Address:
	Address:
2.2	Number of years you have lived in Merseyside
	If your current address is NOT in Merseyside please supply details of previous addresses showing at least 15 years continuous resident in the area. Please attach a separate sheet if necessary.
	Previous Address 1
	From/To
	Previous Address 2
	From/To
	Previous Address 3
	From/To

2.3	Is your home: ☐ Owned Outright ☐ Owned with Mortgage ☐ Rented If rented is your landlord ☐ Private Landlord ☐ Housing Association Please provide the name of your landlord
2.4	Does your rent or service charges payable include any of the following: ☐ Heating ☐ Manager Services
2.5	Date of Birth
2.6	Current Marital Status ☐ Single ☐ Married ☐ Widowed ☐ Divorced/Separated ☐ Living with Partner
2.7	Please give details of your next of kin or personal representative
	Name
	Address
	Telephone
	Email
	Do we have your permission to liaise with your next of kin/personal representative if necessary? ☐ Yes ☐ No

Section 3: Your Employment and Employment History

3.1	Are you currently working? ☐ Yes – Please give details below then go to 3.3 ☐ No – Please go to 3.2
	Occupation Category ☐ Professional ☐ Self-Employed ☐ Supervisory ☐ Clerical ☐ Non-Manual
	Job Title
	Organisation
	Length of Service
	Brief Description of Duties
	Please confirm that The Liverpool Merchants' Guild have your permission to verify the detail provided above with your present employer. Failure to give permission will mean that your application cannot proceed. ☐ Yes ☐
3.2	If you are currently unemployed and are under your state pension age, what is preventing you from being able to work and what are you doing to overcome this?

3.3

Past Employment History – Please provide details of ALL past employment giving as much detail as possible for each entry. You may continue on a separate sheet or enclose a copy of your CV if you prefer.

FAILURE TO PROVIDE THIS INFORMATION MAY MEAN THAT YOUR APPLICATION CANNOT PROCEED.

Employer	Position Held	From/To	Duties

Please confirm that The Liverpool Merchants' Guild has your permission to verify the detail provided above with your past employer(s). Failure to give permission will mean that your application cannot proceed.

☐ Yes

☐ No

Section 4: Your Household – Who Lives with you?	
4.1	What are your current living arrangements? ☐ Living Alone ☐ Living with Partner/Wife/Husband* ☐ With Children ☐ Other* *Please give full name(s), relationship and occupation(s)
4.2	How many children live with you? Ages of children
4.3	How many other adults live with you? Ages of adults
4.4	Are any of the above employed? Please give details.
4.5	Are you disabled? ☐ Yes* ☐ No *Nature of Disability:
4.6	Is anyone else in your household disabled? ☐ Yes* ☐ No *Please tell us who and the nature of their disability:

4.7	Besides you and your wife/husband/partner does any other person contribute to household expenditure? ☐ Yes ☐ No If YES how much is their weekly contribution? £
IF YOU ARE NOT APPLYING FOR A GRANT PLEASE CONTINUE TO SECTION 6	

Section 5: One Off Grants					
	The Liverpool Merchants' Guild will consider applications for grants for items of exceptional expenditure, equipment or adaptations to support independent living. Should you wish to apply for a grant please complete this section of the Application Form. THE MAXIMUM GRANT AVAILABLE IS £8000				
5.1	Purpose of Grant				
	Item(s)	Description			
5.2	Amount of grant requested £				
5.3	Please provide details of a minimum of 2 supplier's estimates showing the full cost.				
		Estimated Cost			
	Name of Supplier:	£			
	Name of Supplier:	£			
	Name of Supplier:	£			
	Estimate Details – Please provide any further information regarding above estimates here.				
5.4	Professional Assessment				
	Has an assessment been carried out by a qualified person (e.g. Occupational Therapist/Social Worker/GP) which confirms the need for the above item(s) and their suitability for use by you? ☐ Yes – Please enclose a copy of the assessment report with this application. ☐ No				
5.5	Other Funding				
	Have you made any applications to other organisations for funding in respect of the item(s) set out above? ☐ Yes* ☐ No				
	*If YES please provide details of the organisations approached and the amounts of any awards made <table border="1"> <tr> <td>Organisation</td> <td>Award Made</td> </tr> <tr> <td></td> <td>£</td> </tr> </table>		Organisation	Award Made	
Organisation	Award Made				
	£				

Section 6: Your Financial Information – ALL applicants should complete this section

If we assess your application as suitable for further consideration, we will ask for supporting documentation when we inform you if we are progressing your application. Our staged approach aims to reduce the amount of information required at this stage.

6.1	INCOME - Please enter details of gross income before deduction of income tax		
	State Pension (Per Week)		
	State Pension Yourself £		
	State Pension – Partner £		
	Pension Credit (Per Week)		
	Pension Credit – Yourself £		
	Pension Credit – Partner £		
	Universal Credit (Per Month)		
	Universal Credit – Yourself £		
	Universal Credit – Partner £		
	JSA/ESA (Per Week)		
	JSA/ESA – Yourself £		
	JSA/ESA – Partner £		
	Carer's Allowance (Per Week)		
	Carer's Allowance – Yourself £		
	Carer's Allowance - Partner £		
	Attendance Allowance/DLA Care Component/PIP Daily Living (Per Week)		
	Attendance Allowance/DLA Care Component//PIP Daily Living – Yourself £		
	Attendance Allowance/DLA Care Component//PIP Daily Living – Partner £		
	DLA Mobility/PIP Mobility (Per Week)		
	DLA Mobility/PIP Mobility - Yourself £		
	DLA Mobility/PIP Mobility - Partner £		
	Other State Benefit (Please Specify)		
	Specify Payment	Yourself £	Your Partner £
	Occupational Pension (Per Annum)		
	Occupational Pension – Yourself £		
	Occupational Pension – Partner £		

	Bank/Building Society Interest (Per Annum)		
	Bank/Building Society Interest – Yourself £		
	Bank/Building Society Interest – Partner £		
	Dividends (Per Annum)		
	Dividends – Yourself £		
	Dividends – Partner £		
	Income From Family/Relatives (Per Annum)		
	From Family/Relatives – Yourself £		
	From Family/Relatives – Partners £		
	Other Income Including Income from Employment (Please Specify)		
	Specify Payments	Yourself	Partner
	£	£	£
6.2	Financial Outgoings		
	Council Tax (Per Annum)		
	Council Tax Outgoings (Yearly) – amount payable by you after any discount £		
	Mortgage Interest Payable (Per Annum)		
	Mortgage Interest (Yearly) – only include interest element of any mortgage payments, not capital element £		
	Water Rates (Per Annum)		
	Water Rates (Yearly) £		
	Rent (Per Week)		
	Rent Outgoing (Weekly) £		
	Housing Benefit Received (Per Week)		
	Housing Benefit Received Weekly £		
	Balance of Mortgage Outstanding		
	Balance of Mortgage Outstanding £		
	Nursing or Residential Home Fees (Per Week)		
	Nursing or Residential Home Fees (Weekly)		
6.3	Capital		
	Cash in bank(s) – give details of ALL accounts held in either sole or joint names		
	Bank Name	Amount £	
	Cash in building societies – give details of ALL accounts held in either sole or joint names		
	Building Society Name	Amount £	

Stocks and shares (give details of shareholding in either sole or joint names)	
Stock/Share Details	Amount £
Premium Bonds/Savings Certificates (in either sole or joint names)	
Certificates	Amount £
Any other capital either in sole or joint names (please give full details)	
Other	Amount £
6.4	In order to comply with Charities Common Reporting Standards (CRS) Regulations please confirm whether or not you are resident in the UK for income tax purposes ☐ I am resident in the UK for income tax purposes ☐ I am not resident in the UK for income tax purposes
6.5	Does anyone hold Power of Attorney over your Financial Affairs? (A Power of Attorney is a legal document giving someone else the authority to take actions or make decisions on your behalf. It enables you to choose a person/ or people (called an attorney) to deal with your property and affairs). ☐ Yes – please give details below ☐ No – please go to Section 7 Name Address Telephone Email

Section 7: Further Information

7.1	Please use the box below to provide further details/information about why you are applying to The Liverpool Merchants' Guild for support.
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Further Information

7.2	Form of Declaration
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I declare that the statements I have made on this application form are true and correct to the best of my knowledge and belief

Signature

Date _____

I agree for The Liverpool Merchants' Guild to store and process the information entered on this application to aide in progressing the application process. This includes passing related information to third parties when appropriate.

☐ I accept these terms and conditions

Submitting your Application to The Liverpool Merchants' Guild

Before sending this form to us please check that you have done the following:-

Completed all relevant sections of the form ☐

Signed the declaration ☐

Enclosed any relevant supporting documents such as: ☐
Letter of support from intermediary, if applicable
Grant Estimates
CV

Completed Forms:

**Please send your completion application form to:
The Secretaries, Monetta LLP, Chartered Accountants
110-114 Duke Street, Liverpool L1 5AG**

What Happens Next?

1. Applications will be acknowledged within 3 weeks.
2. Assessment: once we have assessed your application we will contact you by your preferred means of communication (and your intermediary if applicable) to let you know if your application will be considered further.
3. If your application is selected to progress to next stage, we will request further supporting information/documentation to be emailed/posted to us. This will include specific requests such as:

Birth certificate or passport (we accept expired passports) or driving licence	Most recent letter(s) confirming current amount of your state pension, pension credit and/or other state benefits	Most recent P60 form in respect of private or occupational pensions	Most recent mortgage account statement
Most recent water services bill	Bank statements for the last 3 months for ALL accounts	Most recent rent letter	Most recent council tax bill.

4. Once we have received this supporting documentation – and you have responded to any queries we may have about it – your application will be considered by the Trustees of The Liverpool Merchants' Guild at their next meeting. These take place every three months.

Please contact us if you have any queries about this application form or require further clarification, or indeed if you require a representative of the Secretaries to visit you at home to assist with completion:

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