



Grant Preliminary Enquiry Form

Environment & Leisure

Premier House, Station Road
Swindon SN1 1TZ
Tel: (01793) 466063
Fax: (01793) 466165
Minicom: (01793) 436659
Website: www.swindon.gov.uk

This form is not a Formal Application

Warning - Do Not Start Work Before Approval You May Lose Your Grant

Address of Property to be improved.....

.....

Name(s) of Applicants(s) in full.....

Current address (if different from above).....

.....

Tel. No: Home STD Code.....No.....Work STD Code.....No.....

Details of work for which grant assistance is sought

.....

It will help the Council identify the eligibility of your request if you answer the following questions where applicable.

Are you disabled? Yes/No Are you over 65 Yes/No

Are you in receipt of an income related benefit Yes/No

If so, please specify which benefit

Are you a Landlord/Tenant/Owner Occupier of the Property to be improved? (Please delete as appropriate)

If you are a tenant or owner occupier, how long have you lived in this property?.....

SignatureDate

Important Information

- (1) All grant applications approved under the Housing Grants, Construction and Regeneration Act 1996 and the Regulatory Reform (Housing Assistance) (England and Wales) order 2002 will be subject to the following Council policies in addition to the normal rules:-
 - a) The contractor you choose to carry out the work must be one of those whose estimate/quotation was accepted by the Council as part of the application.
 - b) Unless there are genuine reasons for doing otherwise the Council will pay direct to your contractor any grant payments due provided the work is carried out satisfactorily, also
- (2) Before acceptance estimates and invoices will be closely scrutinised to ensure that they are valid. As a general rule estimates and invoices:
 - a) Must be produced on official stationery containing sufficient information to enable their verification.
 - b) Must contain details of the relevant works and be costed on the itemised basis. Photocopied documents will not normally be accepted, also
- (3) The Council must approve or disapprove a formal application within the specified time limits, and
- (4) Applicants should be aware that certain types of grants have conditions attached requiring the repayment of grant in the event of the property being sold or otherwise disposed of within the grant condition period. Details of these conditions will form part of the grant approval.



Equalities Monitoring Form

Swindon Borough Council has a Corporate Equalities Strategy, which outlines our commitment to providing high quality, appropriate services which meets the needs of the local population. We aim to ensure that no one is discriminated against in the way they access or receive our services.

As part of that commitment, we are monitoring what we do and would be extremely grateful, if you could complete this questionnaire.

The information you provide will be used to improve service delivery and may be shared with other colleagues in the council for the purpose of monitoring our equalities policies and procedures.

Please place a tick in the boxes where applicable:

Are You? Male Female

Please indicate your current age band:

Up to 19 20-29 30-39 40-49 50-59 60-69 Over 70

How would you describe your ethnic origin?

White **Black or Black British** **Chinese or other Ethnic Group**

British

Irish

Polish

Italian

Any other White background

Caribbean

African

Any other Black background

Chinese

Any other ethnic group

Mixed

White and Black Caribbean

White and Black African

White and Asian

Any other Mixed background

Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background

Do you consider yourself to have a disability? Yes No

If yes, please tick the appropriate box:

Dyslexia

Deaf/Hearing Impaired

Wheelchair User/Mobility Impairment

Other, please state

Blind/Partially Sighted

Mental Health Difficulties

Unseen e.g. Diabetes, Epilepsy

If you require assistance in completing this form please contact Customer Services on 01793 463725.

If you require a copy of this form in another format please contact Customer Services on 01793 463725.

I agree for the information I have provided to be used by Swindon Borough Council to monitor Equalities with the Council.

Print Name

Signature

Date

I know that I can contact Customer Services at any time if I wish this information to be removed from the Council's records.