

# Help using this Veterans UK PDF form

## About this form

- **You must download and save this form to your computer before using it**
- You can save data typed into this PDF form if you use the latest version of **Adobe Acrobat Reader**
- To download the latest version of Adobe Acrobat Reader free of charge go to the Adobe website
- This means that you do not have to complete this form in one session

## The form will not save in

- older versions of Adobe Acrobat Reader
- other pdf readers, for example Preview on a Mac or Foxit on a PC

## Feedback

- We would like your feedback about this form. We will only use any comments to improve future versions
- Please email your comments to: [DBS-OPPT@mod.gov.uk](mailto:DBS-OPPT@mod.gov.uk)
- **Please do not send this form or any personal information to this email address. It is for feedback comments only**

**Intentionally left blank**



Applicant

NI Number

**Information about any Savings or Capital Assets you hold**

NOTE : If any Savings are held jointly please record **half** the current balance of the account. **Please attach copies of documentation showing details of your income/benefits and savings/capital assets e.g. copy letters from Pension Service, occupational pension provider, and bank statements.**

**Savings in a Bank, Building Society or Post Office Account**

Name and Address of Bank/Building Society	Account Name & Number	Joint Account	Amount
		Yes No	
		Yes No	
		Yes No	
		Yes No	

**Other Savings** (eg: PSB, NSC, Bonds, ISA's, PEP's, TESSA'S, Cash)  
Nature of Savings

	Joint Account	Amount
	Yes No	
	Yes No	
	Yes No	

**Investments** (eg: Stocks, Shares, Unit Trusts)  
Nature of investments

	Number of Shares	Value

**Property Details (within the last seven years)**  
Address

	Value of Property	Date when Sold (if applicable)

**Have you gifted property or a sum of money to anyone in the last seven years?**

	Property Value or sum of money	When and to whom

**FOR OFFICE USE ONLY**

Total Capital Assets

Amount of Capital Disregard

Assumed or Notional Income from Capital Assets

## Information About Your Income

Single/Couple

Please give details of your <b>weekly</b> income	Amount £	Disregard £	Assessable income £
Retirement Pension			
Pension Credit			
Attendance Allowance			
DLA Care Element			
DLA Mobility Element (Mobility Allowance)			
War Disablement Pension			
War Widows Pension			
Industrial Injuries Benefit			
Industrial Death Benefit			
Severe Disablement Allowance			
Occupational pension			
Annuities			
Other Income (e.g. Trust Fund, Annuities) Please specify			

### DECLARATION

I understand that the information I have provided on this form will be used to determine the level of my assessed contribution for services provided at Ilford Park Polish Home.

I confirm that the information provided on this form is true and accurate.

Signed

Date

### Plus

**Sub Total:**

☐ Notional Income from capital

☐ Pension Credit Guarantee Credit

☐ Pension Credit Savings Credit

**Sub Total**

### Minus

☐ Occupational Pension Transfer

☐ Respite/Short Stay Expenses

☐ Savings Credit Disregard

☐ Personal Allowance for Client's own use

☐ **Weekly Contribution**

### For Office Use Only

Assessed by .....

Date .....

Assessment effective from .....

Approved by .....