

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 or Foxit on a PC

Feedback

If you have any feedback about this form please send these to - DBSAFVS-SPfO-PDT@mod.gov.uk. We will only use these comments to improve future versions.

Please do not send this form or any personal information to this email address.

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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

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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 weekly 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**

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Assessed by

Date

Assessment effective from

Approved by