

# WARWICK RELIEF IN NEED CHARITY

Messrs Moore & Tibbits, Solicitors  
34 High Street  
Warwick CV34 4BE

## APPLICATION FOR A GRANT

*Applicants must be resident within the boundaries of Warwick Town*

<b>REFERRING AGENCY with responsibility/in charge</b>
<b>APPLICANT</b>
<b>ADDRESS</b>
<b>E-mail address:</b>
<b>TELEPHONE NUMBER</b>
<b>AGE &amp; DATE OF BIRTH</b>
<b>PURPOSE AND AMOUNT OF GRANT REQUESTED</b>
<b>Note:</b> A quotation or estimate from the supplier must be supplied with this application
<b>NATURE OF SICKNESS/DISABILITY (if applicable)</b>
<b>FAMILY DETAILS (E.G. NO/AGES OF CHILDREN ETC</b>
<b>HAS AN APPLICATION BEEN MADE TO OTHER AGENCIES FOR A GRANT</b> <b>YES/NO</b>
<b>IF YES, TO WHOM AND HOW MUCH</b>
<b>HAS APPLICANT APPLIED PREVIOUSLY FOR GRANT FROM THIS CHARITY</b> <b>YES/NO</b>
<b>FINANCIAL INFORMATION (please complete enclosed form)</b>
<b>SIGNATURE</b>
<b>DATE</b>

*This form should be returned to Messrs Moore & Tibbits with a covering letter giving further details of the applicant and the circumstances which have led to the application being made.*

***Failure to return this completed form will exclude the applicant from being considered***

**FINANCIAL INFORMATION:**

**(1) ASSETS:**

- (A) CAPITAL: £ .....
- (B) HOUSE: £ .....
- (C) CAR: £ .....
- (D) INVESTMENTS: £ .....
- (E) SAVINGS: £ .....
- (F) DEPOSIT ACCOUNT: £ .....

**(2)**

**LIABILITIES**

- (G) MORTGAGE: £ .....
- (H) BORROWINGS: £ .....
- (I) DEBTS: £ .....
- (J) HIRE PURCHASE: £ .....
- (K) BANK OVERDRAFT: £ .....
- (L) OTHER £ .....

**(3)**

**INCOME:**

- (A) INVESTMENT INCOME: £ .....PER  
WEEK/MONTH
- (B) STATE PENSION: £ .....PER  
WEEK/MONTH

(C) OCCUPATIONAL PENSION: £ .....PER  
WEEK/MONTH

(D) SOCIAL SECURITY BENEFIT: £ .....PER  
WEEK/MONTH

(E) SALARY OR WAGES: £ .....PER  
WEEK/MONTH

(F) NATURE OF WORK: £ .....PER  
WEEK/MONTH

TOTAL WEEKLY/MONTHLY INCOME: £