

Adult Social Care

Working together to enable people to 'live well and independently in Telford and Wrekin

Universal Deferred Payment Application form

Section 1 Details of person applying for a Universal Deferred Payments Agreement

Title (e.g. Miss, Mr, Mrs, Ms)

First Name(s)

Surname

Date of Birth

Current address:
(i.e. care home or Supported Living Accommodation)

Postcode

Email

Telephone Number

Are you:

Single

Married

Divorced

Separated

Widowed

Civil Partnership

Section 2 Details the representative of person applying for a Universal Deferred Payment Agreement (if relevant)

Title (e.g. Miss, Mr, Mrs, Ms)

First Name(s)

Surname

Date of Birth

Address:

Postcode

Email

Relationship to the person named above

Do you have legal authority to act on behalf of the person named in section 1? If yes please give details.

Enduring Power of Attorney (Must be registered)

Lasting Power of Attorney

Deputy or receiver

Please attach documents confirming legal arrangements

Please Note

The person signing the agreement will be required to complete a Land Registry Certificate of Identity (form ID1) and provide 2 certified photographs.

Section 3 About the property

Please give the full address of the property or other asset

What is the current value?

£

Please attach third party valuation documentation

Do you have a mortgage or other secured loan on the property?

Yes

No

If yes: What type of mortgage or loan do you have?:

Mortgage

Equity Release

If other type of loan please give details

How much do you pay each month?
(include any endowment or insurance premium)

£

Name of mortgage lender / Loan Provider

Account number

Date of agreement

Amount of outstanding Debt

£

Please attach documents confirming mortgage/loan details

Is the property registered with the Land Registry

Yes No

If yes: Please give Land Registry reference number

Does anyone else have a legal/beneficial interest in the property with you?

Yes No

If yes: Please give their details and their interest

Legal/Beneficial Interest in property (joint owner/tenants in common/ownership by trust)

Name

Address

Name	Address	Legal/Beneficial Interest in property (joint owner/tenants in common/ownership by trust)

Further information

Please attach documents confirming details of beneficial/legal interest in property

What Type of property is it?

Detached house

Semi Detached House

Terraced house

Bungalow

Flat

Other

If other please give details

Does anyone live in the property with you? Yes No

If yes please give details of relationship to you

Name	Date of Birth	Relationship to you

Section 4 Property Maintenance and building insurance

You will need to maintain the property and land, including gardens and outbuildings. This means the property will need to be insured and utility bills will need to be paid. It may also include renting the property out. Please explain how you intend to maintain and upkeep the property, including whether you plan to rent it out.

Please attach copy of insurance documents

Section 5 About the property expenses

Type of expense	How much	How often? (Weekly, Monthly, Yearly)
Service Charge	£	
Fuel Charge	£	
Ground Rent	£	
Building Insurance	£	
Other Charges	£	
	£	
	£	
	£	

Please attach documents confirming expenses

Section 6 Other information

Section 7 Checklist for Documentation

Please check and ensure you have provided the below documentation where applicable.

- | | | | |
|--------------------------------------|--------------------------|--------------------------------|--------------------------|
| Details of legal representative | <input type="checkbox"/> | Mortgage Details | <input type="checkbox"/> |
| Joint or other interests in property | <input type="checkbox"/> | Property expenses | <input type="checkbox"/> |
| Property insurance details | <input type="checkbox"/> | Third party property valuation | <input type="checkbox"/> |

Section 8 Declaration

I wish to make an application under the Universal Deferred Payments Scheme.

I understand that acceptance of any application under the scheme is at the discretion of Telford & Wrekin Council, subject to my meeting the eligibility criteria and the local authority being able to obtain adequate security. The deferred payment will not take effect until a formal agreement is entered into.

I confirm that I own/part-own (please delete as appropriate) the property specified in Section 3. I authorise Telford & Wrekin Council to check legal title to the property.

When the agreement begins, I agree to a legal charge being placed on the property specified in Section 3 and agree to pay the legal costs of Telford & Wrekin Council.

I agree that I shall be responsible for payment of the weekly contribution to the cost of my care that I am assessed to make under the regulations specified in the Care Act 2014 regarding charging from my income and other capital.

I confirm that I and all other persons who occupy or have an interest in the property specified in Section 3 have been told of the need to take independent legal and financial advice before I enter into an agreement under the Universal Deferred Payments Scheme.

I confirm that the information given on this form is true and accurate to the best of my knowledge.

I have read and understood this application for a Universal Deferred Payment and the terms of this declaration.

Disclaimer

The Council will use the information you have provided for the purpose of considering the application for a Universal Deferred Payment and the financial assessment of the person's contribution. No personal information you have given us will be passed on to third parties for commercial purposes. *[Our policy is that all information will be shared among officers and other agencies where the legal framework allows it, if this will help to improve the service you receive and to develop other services.]*

If you do not wish certain information about you to be exchanged within the Council, you can request that this does not happen.

Your full name

Your signature

Date

If you are signing on behalf of the person applying to use the Universal Deferred Payments Scheme, you must be the person named in Section 2, and have legal authority to act.