

Deferred Payment Scheme • Application Form

please complete highlighted fields, add your signature, and PDF-print the form to prevent further editing

Section 1	Details of Person applying for the Deferred Payment Scheme			
LBBD Reference				
Title & Full Name				
Date of Birth				
Care Home Address (if already resident)				
Email				
Telephone				
Section 2	Details of Representative of Person applying for the Deferred Payment Scheme (if applicable)			
Title & Full Name				
Home Address				
Email				
Telephone				
Preferred Contact Method				
Relationship to Person named in Section 1				
Do you have a legal authority to act on behalf of the Person named in Section 1? If yes, please give details and provide a Certified Copy of a document				
Enduring Power of Attorney				
Lasting Power of Attorney – Property & Financial Affairs				
Lasting Power of Attorney – Health & Welfare				
Deputy or Receiver				
Solicitor				

Section 3	Ak	About the Property						
Please give the full address of the Property			What is the c			urrent		
					£			
Do you have a Mortgage or other Loan secured on the Property?				No				
If Yes, what type of Mortgage of	If Yes, what type of Mortgage or Loan do you have?							
Equity Release / Lifetime		Repayr	nent Interest Only					
If other type of Mortgage or Loan, please give details:								
Name of Mortgage Lender								
Account Number & Date of Ag	reemer	nt						
Outstanding Mortgage Balance			£					
Does anyone else have an interest in the Property with you?			Yes No					
If Yes, please give their details and the value or percentage of their interest								
Name	Address			Interest in Property				
Please attach Documents confirming Mortgage and Ownership details								
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?	Yes		No					
If yes, please give details:								

Section 4	Property Expenses						
Type of expense		How much	How often? (weekly, monthly, annually)				
Service Charge		£					
Energy & Utilities		£					
Ground Rent		£					
Building Insurance		£					
Other Charges (please specify)		£					
		£					

Please attach Documents confirming Expenses

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 indicate whether you plan to rent it out, or if already rented, provide details and a copy of the Tenancy Agreement.

Plan to Rent Out No plans to Rent Out Already Rented Out

The financial assessment will allow you to keep up to £144.00 per week under the Deferred Payment Agreement. This is called a Disposable Income Allowance (DIA).

If you receive rental income from the property, financial assessment may disregard up to 20% of this income.

You might want to reduce your maximum allowable DIA and Disregarded Rental Income, to reduce the amount you defer against your property.

Do you wish to reduce the amount of your DIA?

Yes, to £ per week (between £30 and £144)

No, I wish to keep full £144 per week

Do you wish to reduce the amount of your Rental Income Allowance?

Yes, to % (between 0% and 20%)

No, I wish to keep full 20%

N/A



Section 6	Checklist for Documen	tation				
Use this checklist	Use this checklist to make sure you have provided all the documentation requested					
Details of legal representative						
Joint or other interests in the property						
Mortgage details						
Property expenses	3					
Section 7 Declaration						
I wish to make an ap	oplication under the Deferred	d Payment Sche	me.			
I understand that acceptance of any application under the scheme is at the discretion of Barking and Dagenham Council, subject to meeting the eligibility criteria and the local authority being able to obtain adequate security. The deferred payments will not take effect until a formal agreement is entered into and finalised by HM Land Registry completing Council's legal charge application.						
I confirm that I own	(part-own) the property spec	ified in Section 3	3.			
I authorise Barking a	and Dagenham Council to ch	neck the legal tit	le 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 Barking and Dagenham 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 regulations 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 Deferred Payment 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 the Deferred Payment Scheme and the terms of this declaration.						
Barking and Dagenham Council will use the information I have provided for the following purpose of deciding on the application for a deferred payment and the financial assessment of the person's contribution. No personal information I have given you will be passed on to third parties for commercial purposes.						
Note to applicants:						
The Council's policy is that all information will be shared among its officers and other agencies where the legal framework allows.						
Your Full Name						
Your Signature			Date			

Please return your completed DPA Application Form by email, or post to:

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