



Here2Help Scheme

Customer
application form

**RHAGOROL O'R TAP
WONDERFUL ON TAP**

**HAFREN
DYFRDWY**

Application form

Account number

Account Holders Details

First name

Surname

1st Line of address

Postcode

Landline Number

Mobile Number

E-mail address

Date of Birth

Additional Contact Details

(If you would also like us to discuss your application with somebody else)

First name

Surname

1st Line of address

Postcode

Landline Number

Mobile Number

E-mail address

Date of Birth

Relationship to Account Holder:

Data Protection Act

We produce statistics for use by other organisations (e.g. Government departments, local authorities, Hafren Dyfrdwy and Citizens Advice). These statistics are anonymous and nobody outside of these organisations will be able to find out that you have asked for help with your payments or obtain any of your personal information, for example your home address.

I am happy for you to use my anonymous data in this way

Yes No

Please tick

We would like to contact you in the future to find out what you thought of the service you have received here. This helps us to improve our service for others.

I am happy for you to contact me to find out what I thought of the service

Yes No

Please tick

1. You and your household

Total number of people in household (aged 18+)

Number of dependent children 13 and below

14 – 18

Number of vehicles at the property

2. Monthly income

Income from employment (*after tax and N.I. deductions*)

You
£

Your partner
£

JSA / ESA / IS / Pension credits

£

£

Housing benefit

£

£

Council tax benefit

£

£

Tax credits

£

£

Child benefit

£

£

Universal credit

£

£

Other benefit (*DLA / PIP / mobility / carers allowance*)

£

£

Pension (*private / state*)

£

£

Money from other people

£

£

Any other income

£

£

Total household income

£

£

3. Household outgoings

Please tell us the monthly figure that you pay out for the below

Mortgage / Rent

£

Gas

£

Second Mortgage / Secured loan

£

Electricity

£

Ground rent / service charges

£

Water

£

Buildings / Contents Insurance

£

Other fuel (*coal, oil, propane, gas etc*)

£

Magistrates Court fines

£

Property maintenance

£

Council tax

£

Phone, broadband and television

£

Maintenance and child support

£

HP agreements (*appliances / white goods*)

£

TV Licence

£

Total household outgoings

£

4. Personal outgoings

Please tell us the monthly figure that you pay out for the below

Food (home / school / work)	£ <input type="text"/>	Mobile phone	£ <input type="text"/>
Clothing	£ <input type="text"/>	Hairdressing	£ <input type="text"/>
Housekeeping	£ <input type="text"/>	Gambling (lottery, pools, sports)	£ <input type="text"/>
Other housekeeping	£ <input type="text"/>	Veterinary (bills / insurance)	£ <input type="text"/>
Cleaning and toiletries	£ <input type="text"/>	Health (dentist / glasses / prescription / insurance)	£ <input type="text"/>
Newspaper and magazines	£ <input type="text"/>	Pocket money and school trips	£ <input type="text"/>
Cigarettes, tobacco & sweets	£ <input type="text"/>	Activities (leisure / sport / evenings out / gym)	£ <input type="text"/>
Alcohol	£ <input type="text"/>	Gifts (christmas, birthdays, charities)	£ <input type="text"/>
Laundry and dry cleaning	£ <input type="text"/>	Holidays	£ <input type="text"/>
Nappies and baby items	£ <input type="text"/>	Care (adult / children)	£ <input type="text"/>
Pet food	£ <input type="text"/>	Other outgoings	£ <input type="text"/>
Travel (public transport / petrol / diesel)	£ <input type="text"/>	Total personal outgoings	£ <input type="text"/>

5. Priority debts

If you have any of the below debts please insert them here

	Amount owed	Monthly payment
Mortgage / Rent arrears	£ <input type="text"/>	£ <input type="text"/>
Council tax arrears	£ <input type="text"/>	£ <input type="text"/>
Gas / Electricity arrears	£ <input type="text"/>	£ <input type="text"/>
Outstanding Fines	£ <input type="text"/>	£ <input type="text"/>
Maintenance / Child Support	£ <input type="text"/>	£ <input type="text"/>
TV Licence arrears	£ <input type="text"/>	£ <input type="text"/>
Hire purchase or conditional	£ <input type="text"/>	£ <input type="text"/>
Tax / National Insurance	£ <input type="text"/>	£ <input type="text"/>
Student loan / bank loan / secured loan	£ <input type="text"/>	£ <input type="text"/>
Any other debts	£ <input type="text"/>	£ <input type="text"/>
Total monthly payments towards debt		£ <input type="text"/>

6. Disposable income

What is your disposable income per month (money you have left over) after taking into account your monthly outgoings and your priority debts?

7. Additional factors

What is your employment status?

(Part-time employed; Agency/Intermittent employed; Zero hours employed; Employed but below minimum wage; Retired; Student; Unemployed; Self-employed)

Additional Information

Government Benefits

Please tick if any of the below apply

I am in receipt of a means tested benefit

Are you waiting for an award decision or appealing against a decision not to be awarded a means tested benefit

Disabilities

Does anybody in the household receive a disability benefit?

Is anybody waiting for an award decision or appealing against a decision not to award a disability benefit

Dependants

I have a dependent child or a dependent elderly relative living at the property

Restrictions

I have a cap applied to my benefits

I am subject to bedroom tax (One bedroom)

I am subject to bedroom tax (Two bedroom)

I am subject to housing benefit deductions because of a non-dependant

If you have ticked any of the boxes opposite, please provide further information

Please provide details of any restrictions

Water arrears

I am in Water arrears of

£400 - £600

£601 - £800

£801 - £1,000

£1,000+

Please provide further information

8. Any other information

Please provide us with any other information that you feel will support your application?

9. Payment options

How would you like to pay your water bill?

Direct Debit

Watercard

How often would you like to pay your water bill?

Weekly

Fortnightly

Monthly

10. Confirmation

Please provide 3 months of evidence to support your income shown on page 1 of this application.

(Bank statements, benefit statements, Wage slips)

Signed

Date

0800 085 3053

Hafren Dyfrdwy
PO Box 507
Darlington DL1 9XF

hdcymru.co.uk