

Margate & Dr Peete's Charity Application Form

About

History

The Charity was formed by the amalgamation of two old-established local charities, Dr Peete's Charity and Margate Philanthropic Institution. It aims to provide assistance to persons who are in conditions of need, hardship, or distress, and who are unable to gain help from other sources (social services, etc.)

Area of Benefit

This is restricted to persons resident in the former "Borough of Margate", and includes Cliftonville, Garlinge, Westbrook, and Westgate.

Who Can Apply?

Anyone resident in the area mentioned above can be eligible for assistance if they can prove they are in need. It helps Trustees to come to a decision if the application is backed by someone in authority, such as Councillor, Doctor, Clergyman, etc. Sometimes, Trustees will ask to visit an applicant to discuss the matter in more detail. Applicants will be asked to complete a form detailing their income and expenditure. Students may also apply, in which parental details will be required, also Trustees will ask if parents are able to contribute to the item/s needed.

Form of Assistance

Trustees prefer to authorise the purchase/payment for a particular item, and do not advance cash to clear debts or grant a cash sum. For example, recent awards have been made for: a washing machine, a gas cooker, a fridge/freezer, bunk beds, carpets, school uniform, travel expenses for university interview and plumbing/roofing repairs.

Unfortunately, the charity is not in a position to make grants in cash.

Trustee Meetings

Trustees meet six times each year, so there is sometimes delay before the application can be considered, but if the matter is urgent, it may be possible for an application to be granted by email circulation to Trustees.

Once you have completed the application form below, please email it to Dr Peete's trustees' email: info@drpeetescharity.co.uk

Details of Applicant

| | |
|---|--|
| Full Name | |
| Address | |
| Tel. No. | |
| Date of Birth | |
| Marital Status | |
| Occupation | |
| Name of present/last employer | |
| How long have you lived in the former borough of Margate? | |

Family Details

Partner

| | |
|---|--|
| Name | |
| Date of Birth | |
| Occupation | |
| Name of present/last employer | |
| How long have you lived in the former borough of Margate? | |

Children

| | |
|------------------------------|--|
| Name(s) and Date of Birth(s) | |
|------------------------------|--|

Other Dependants

| | |
|------------------------------|--|
| Name(s) and Date of Birth(s) | |
|------------------------------|--|

Health

| | |
|--|--|
| Details of any chronic disease or disability of applicant or any family member | |
|--|--|

General Information

| | |
|---|--|
| Have you applied for social fund loan? | |
| Name and Address of third party who can provide support for your application (e.g. councillor, clergyman, Doctor) | |

Income

Please show amount per month

| | Self | Partner |
|----------------------------|------|---------|
| Net Income from Employment | | |
| Occupational Pension | | |

State Benefits

| | Self | Partner |
|---|----------|---------|
| Retirement Pension | | |
| Income Support | | |
| Family Credit | | |
| Unemployment Benefit | | |
| Incapacity Benefit (Sickness Benefit) | | |
| Severe Disablement Allowance | | |
| Mobility Allowance | | |
| Child benefit/One parents Benefit | | |
| Housing Benefit | | |
| Maintenance Payments | | |
| Income from Property Investments | | |
| Have you any other income or does any member of your family assist you? | Yes/No | |
| If Yes, please give details | | |
| Total Monthly Income | £ | |

Savings

| | |
|--|--------|
| Have you any money deposited in the post office, building society or bank? | Yes/No |
| If Yes, please give details | |
| Do you have any other investments? (e.g., income bonds, shares etc.) | Yes/No |
| If Yes, please give details | |

Expenditure

| | £ |
|--|--------|
| Do you own your own home? | Yes/No |
| If Yes, state the amount of mortgage outstanding | |
| Are there any arrears? | Yes/No |
| If Yes, state how much | |
| How much are your monthly repayments? | |

| | | | |
|---|--|--|---|
| | | | £ |
| What are your expenses PER MONTH for the following? | | | |
| Rent | | | |
| Council Tax | | | |
| Yes/No | | | |
| Water Rates | | | |
| Gas | | | |
| Electricity | | | |
| House Insurance | | | |
| Other Insurances (Please Specify) | | | |
| Telephone | | | |
| Food Bill | | | |
| T.V. Licence | | | |
| Credit Card Repayments | | | |
| Bank Loan Repayments | | | |
| Please state original amount borrowed | | | |
| Period of loan | | | |
| Other Expenditure (please specify) | | | |
| Total Monthly Expenditure | | | £ |

Request

| |
|--|
| <p>Please give details of any items/projects which you are requesting to be funded by Dr Peete's Trustees with Costs etc included.</p> |
| |

Declaration

| | | | |
|--|--|------|--|
| I/WE declare that the answers given are, to the best of MY/OUR knowledge, correct. | | | |
| Applicant | | Date | |
| Partner | | Date | |
| <p>Note: In the event that the applicants' circumstances should improve or change, he/she will notify the charity immediately.</p> | | | |

Please continue to data consent form below.

Margate & Dr Peete's Charity

Charity No. 212503

Data Consent Form

In order to comply with requirements of the data protection Act 1998 and General Data Protection Regulations (GDPR) it is necessary for Margate & Dr. Peete's Charity to have your permission to circulate to the Charities Trustees, the personal information you are required to submit when applying for assistance from the charity.

Please complete this form by signing and returning to the Charity's secretary along with the completed application for assistance.

Please note, Margate & Dr. Peete's Charity will only use your personal data for the purposes you have authorised.

- I have read and accept the terms of Margate & Dr. Peete's Data Privacy Policy.
- I hereby authorise Margate & Dr. Peete's Charity to use my personal data in such a way as to decide whether to successfully grant my application for assistance.
- I authorise Margate & Dr. Peete's Charity to use my name, e-mail address or telephone number to inform me as to whether my application to Margate & Dr. Peete's Charity has been successful.

| | | | |
|------------|--|------|--|
| Signed | | | |
| Print Name | | Date | |

Once you have completed the application form below, please email it to Dr Peete's trustees' email: info@drpeetescharity.co.uk