

DISCRETIONARY PAYMENT AGREEMENT APPLICATION

<p>Customer:</p> <p>Surname: _____ Forename(s) _____</p> <p>Title: _____ Date of birth: _____</p>					
<p>Address of property:</p> <p>Telephone:</p> <p>Email:</p> <p>Correspondence address (if different from above)</p>					
<p>Do you have a partner who is named on the lease with you? YES/NO</p> <p>We use partner to mean a person you are married to or a person you live with. Both parties' income and savings must be included on this application if both names appear on the lease.</p> <p>Your partner</p> <p>Surname: _____ Forename(s) _____</p> <p>Title: _____ Date of birth _____</p>					
<p>Do you live in this property as your main home:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Leaseholder 1</td> <td style="width: 50%; border: none;">Partner/leaseholder 2</td> </tr> <tr> <td style="border: none;">Yes/No</td> <td style="border: none;">Yes/No</td> </tr> </table> <p>IF THE PROPERTY IS NOT YOUR MAIN/ONLY HOME YOU MAY NOT BE ELIGIBLE FOR PAYMENT OPTIONS. PLEASE COMPLETE THE REMAINDER OF THIS FORM IF YOU STILL WISH YOUR APPLICATION TO BE CONSIDERED</p>		Leaseholder 1	Partner/leaseholder 2	Yes/No	Yes/No
Leaseholder 1	Partner/leaseholder 2				
Yes/No	Yes/No				
<p>Do you currently have a mortgage? Yes/No (Delete as appropriate)</p> <p>If yes what is the outstanding balance? £</p> <p>Estimated value of the property: £</p>					
<p>Do you own any other property or land?</p> <p>Yes/No (delete as appropriate)</p> <p>If yes please provide details of the property including estimated current value</p>					

STATEMENT OF FINANCIAL CIRCUMSTANCES
HOUSEHOLD INCOME

	LEASEHOLDER 1	PARTNER/LEASEHOLDER 2
Earnings – employment Monthly gross earnings. (Please send P60 for last tax year)		
Earnings – self employment Monthly gross earnings. (Please send copy of tax statement for last tax year)		
State pension income (monthly)		
Other pension income - e.g. former employer pension or private pension (monthly) Please send annual pension statement for last tax year		
Any other benefits received(e.g. disability living allowance, attendance allowance, income support, tax credit) Please specify and provide each monthly amount		
Other income e.g. Child support, property rental income etc. Please give details.		
Trust income – please give name and address of the trustees		

SAVINGS

By savings we mean money in a bank, building society or post office

Premium bonds or national savings certificates

Shares, unit trust or other investments

Any other money that you have

Name of Bank/building society, post office account etc	Latest balance	LEASEHOLDER 1	PARTNER/LEASEHOLDER 2

Government bonds including national savings certificates and premium bonds

Name of bond etc	Amount of holding	LEASEHOLDER 1	PARTNER/LEASEHOLDER 2

Stocks, shares and other investments

Name of investment	Current value	LEASEHOLDER 1	PARTNER/LEASEHOLDER 2

PLEASE PROVIDE STATEMENTS FOR ALL BANK/BUILDING SOCIETY/POST OFFICE ACCOUNTS FOR LAST 3 MONTHS.

DOCUMENT CHECK. ENCLOSED WITH THIS FORM: *Tick which ones apply to you.*

P60

Bank statements – last 3 months

Tax self-assessment statement

Pension statement

Benefit letter or award

Others (please list)

OTHER PAYMENT OPTIONS

What other finance options have you considered to meet the cost of the works?

- Loan
- Mortgage
- Equity release
- Other

Please provide evidence that other finance options have been considered and explain why these are not available.

Eligibility for a payment plan will not be considered without this evidence.

Additional information you would like us to consider? E.g. temporary situations, personal circumstances, existing outgoings etc. Please provide any additional evidence to support your application here.

HOW ARE YOU PROPOSING TO PAY:

Explain here how you intend to pay the debt. Say how much you could pay now and how you will pay the remainder. For example, any lump sum payment you can make, what you can pay each month and when your first payment would be made

My proposals for repayment are:

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DECLARATION:

Aster will use the information provided for the sole purpose of assessment of eligibility for financial assistance through the 'major works discretionary payment plan'. This information will be assessed by Aster staff and may be passed through our financial assessment tool (Policy in Practice). This information will be retained in line with Aster's document retention schedule and will be stored and disposed of securely.

Our [Privacy Notice](#) on our website gives more information about how we may use your personal data.

We will not share the information you provide for these assessments with any unconnected third parties without contacting you to ask your consent.

I/we have understood the statement set out to me/us and consent to the use of an external application (Policy in Practice) for holding my personal data if required. I have been advised to view the Privacy Notice on Asters website for more information on how Aster may use my/our personal data.

I/we declare that the information I/we have supplied on this form is true and complete. I/we understand that Aster may take appropriate action if false information is knowingly supplied. I/we authorise Aster to make any enquiries necessary to check the information given.

Signed (Leaseholder) _____

Date: _____

Signed (Partner/Leaseholder 2) _____

Date: _____

**Sign and date this form when complete and return to the address on the letter.
Keep a copy of this form for your records.
If your circumstances change, please update us as soon as possible.**

