



Application for move on funding pro forma

Section 1: Main Guest Details

Please use this section to provide details of you (as the primary/main guest completing the form).

Please use the same name (as detailed here) for the subject of the email when sending evidence to Hayley.Varney@worcsregservices.gov.uk email address

First Name	
Surname	
Date of Birth (please enter as dd/mm/yyyy e.g. 21/05/1997)	
Current address	
Contact number	
Contact emails address	

Section 2: Guest household details

Please use this section to provide details of your accompanying household members, who will be moving with you.

Full name of all household members

	First Name	Surname
Household member 1		
Household member 2		
Household member 3		
Household member 4		

Household member 5		
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Section 3: Funds you are applying for and evidence you will provide

Please use this section to advise in respect to which type of funds you are making a claim for and to indicate which evidence you will supply to support the fund or funds being claimed for.

- A list of Furniture that can be applied for:
 - Beds
 - Mattress
 - Bedding (quilts/pillows/bedding)
 - Wardrobes
 - Dining table and chairs
 - Coffee table
 - Sofa
 - Armchair
 - Kettle
 - Iron
 - Ironing board
 - Microwave
 - Washing machine
 - Tumble dryer
 - Fridge/freezer
 - Cooker
 - Cutlery
 - Pots & Pans
 - Cups
 - Plates/bowls
 - Curtains
 - Mirrors
 - TV / TV license

- Moving costs
 - Van hire (Removal or rental van)
 - Removals company

- Initial bills (up to 12 weeks)
 - Water
 - Council tax
 - Electric
 - Gas
 - TV license
 - Contents insurance
 - Broadband

I am applying for funds to: (you can select multiple options)

- Pay rent in advance
- Rent deposit
- Furniture
- White goods (e.g. fridge, freezer, washing machine, cooker)
- Moving costs (transportation, movers)
- Utility bills

Please specify the total amount you are applying for (e.g. £1500)	
Are any of the funds being paid direct to you?	
What is the reason for funds being paid direct to you? <i>Examples could be:</i> 1.) <i>You required the payment urgently over the weekend when payments cannot be made (Friday after 1pm – Sunday Midnight).</i> 2.) <i>You moved out prior to the Move On Fund launching (on or before 25th of Jan 2023).</i> 3.) <i>You purchased second hand goods and paid using cash.</i> <i>etc.</i>	
Have you already moved into your rented accommodation?	
If yes, which date did you move into new housing?	
If no, which date does your tenancy agreement begin?	

Supporting information:

Only required if you wish to add any additional information that isn't covered above.

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Please tick box below to indicate the evidence you will provide for your fund claim
You can select multiple options e.g. if you are applying for rent and furniture - tick the 'Copy of tenancy agreement or rent invoice/ receipt' AND 'Furniture or White good receipt'

On completion of the form; please can you send the evidence (as tick boxed below) to Kerry.Roberts@bdht.co.uk email address, with your name as the Subject of the email.

- A copy of the tenancy agreement (outlining cost of rent) or rent invoice / rent receipt
- Rent deposit invoice or receipt (tenancy deposit scheme)
- Furniture or White goods receipt
- Moving costs invoice or receipt
- Holding deposit fee receipt
- Initial bills (not exceeding the first 12 weeks)
- Rent guarantor/ guarantee agreement

Section 4: Homes for Ukraine Host details

Please use this section to provide name and contact number of the host that you have been living with, under the Homes 4 Ukraine Scheme or the host that you were living with/ that sponsored you

Host Name (First Name and Surname)	
Host contact number or email address	

Section 5: Please provide the bank account details for where the funds need to be paid to

Please use this section to provide account details of where funds should be paid to.

Payee name (Enter: Title, First Name and Surname or Business Name)	
Amount to be allocated to this account	

Sort Code (nn-nn-nn)	
Account Number	
Address of account holder	
Reason for paying (rent, deposit, white goods, furniture, moving fees)	

Payee 2

If applying for funds for multiple categories and payment is needed for someone else, please insert next payee details below

Payee Name (Enter: Title, First Name and Surname or Business Name)	
Amount to be allocated to this account	
Sort Code (nn-nn-nn)	
Account Number	
Address of account holder	
Reason for paying (rent, deposit, white goods, furniture, moving fees)	

Remaining Payees

If applying for funds for multiple categories and you need to pay multiple people - list the following for each payee:

Payee Name (Enter: Title, First Name and Surname or Business Name)	
Amount to be allocated to this account	
Sort Code (nn-nn-nn)	
Account Number	
Address of account holder	
Reason for paying (rent, deposit, white goods, furniture, moving fees)	

Additional information
Any information to support payee details provided

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Section 6: Agreement

By completing and signing this form, I confirm that I take full responsibility to utilize the move on funds allocated to me, under the Homes 4 Ukraine Scheme, as outlined in accordance with the above information supplied; to support me in the establishment of independent living.

Full Name	
Date Completed	
Sign	

