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| --- | --- |
| **Employee ref:** |  |
| **Request no:** |  |



**Energy Grant Application Form**

**If you would like to take advantage of the energy grant, please complete the application form below. Please note all applicable fields are mandatory.**

**Important Dates:**

**First application window:** Apply by 31st October 2025 to receive payment on or before 5th December 2025

**Second application window:** Apply by 31st December 2025 to receive payment on or before 6th February 2026.

**Please ensure you submit your applications during the application period to be considered for the grant.**

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| --- | --- | --- | --- | --- | --- | --- |
| **1. About the former employee** | | | | | | |
| **Title** |  | **First Name** |  | | **Surname** |  |
| **Address**  *(Include postcode)* | |  | | | | |
| **Contact telephone number** | |  | | | | |
| **Email address** | |  | | | | |
| **NI Number** | |  | | | | |
| **Date of birth** | |  | | | | |
| **2. About you**  *The applicant (you only need to complete this section if you are not the former employee)* | | | | | | |
| **Title** |  | **First Name** |  | | **Surname** |  |
| **Address**  *(include postcode)* | |  | | | | |
| **Contact telephone number** | |  | | | | |
| **Email address** | |  | | | | |
| **NI Number** | |  | | | | |
| **Date of birth** | |  | |  | | |
|  | | | | | | |
| **3. Information about the grant** | | | | | | |
| * This is an application for a one-off grant of £300 to assist with energy costs. * This grant is limited to **one per household**. | | | | | | |
| **4. Payment details** | | | | | | |
| * If you are eligible, the grant of £300 will be paid directly into your bank account. * The bank account must be in the name of the former employee or the qualifying applicant. * It is your responsibility to check that the bank account details you provide are correct. * If your bank account details change between the point of application and the payment, it is your responsibility to update the Baily Thomas Provident Fund (BTPF) office in writing of any changes. | | | | | | |
| Account holder’s name: | | | | | | |
| Bank name: | | | | | | |
| Sort code: | | | | | | |
| Account number: | | | | | | |
| **5. BTPF General Communications** | | | | | | |
| To provide better, more regular communication to beneficiaries, and to reduce our environmental impact, email will be our preferred method of communication going forwards.  If you would still like to receive hard copy communication via the post, please tick this box: **☐** | | | | | | |
| **6. Mansfield Brew Newsletter** | | | | | | |
| The Mansfield Brew (the publication produced by the Beneficiary Liaison Group) can be sent to you either digitally by email or as a printed copy. Your preference for receiving the newsletter does not affect your other communication preferences. Please tick your preference for receiving this:  Email : **☐**  Printed copy : **☐**  I do not wish to receive the Mansfield Brew : **☐** | | | | | | |
| **7. Declaration** | | | | | | |
| * I declare the information I have provided in this form is, to the best of my knowledge, accurate and true and I will update the Baily Thomas Provident Fund (BTPF) if my information changes. * I understand that the information I have provided will be used to process this application and to update beneficiary records. * Where applicable, I understand that my personal data will be shared with relevant third parties for the purpose of accessing the grants/benefits provided by the BTPF * Where data has been provided on behalf of someone else, I declare that they are aware of this and understand their data will be processed for the purpose of accessing the grants/benefits provided by the BTPF, in line with the BTPF Privacy Policy * I understand that to comply with the legal reporting obligations for Trustees, basic personal information will be disclosed to HMRC for inclusion on the Trust Register. * I understand that the information I have provided will be processed in accordance with the BTPF Privacy Policy | | | | | | |
| **Your Signature** *(Applicant)* | |  | | | | |
| **Date** | |  | | | | |
| **Your completed form should be returned by post or email to:**  **Baily Thomas Provident Fund**  **Mansfield Business Centre**  **Ashfield Avenue**  **Mansfield**  **NG18 2AE**  **Email: enquiries@bailythomasprovidentfund.org.uk**  **If you need help completing this form, please contact us on: 01623 473290**  **www.bailythomasprovidentfund.org.uk** | | | | | | |