



Benevolent Fund

OFFICIAL USE ONLY

REF NO:

The Road Haulage Association, Roadway House, Bretton Way, Bretton, Peterborough PE3 8DD.

Information given on this form is strictly confidential.

1. Name Mr/Mrs/Miss/Ms (please delete as appropriate)

Surname

Forename(s)

Married/Single/Divorced/Widow/Widower/Partner (please delete as appropriate)

Date of marriage or partnership

NI number

Date of birth

2. Address

Postcode

Previous address (if within last three years)

Postcode

Telephone number

3. Dependants If you are a dependant, please state.

Relationship

4. Employment with RHA member

You must provide at least one proof of employment from a past or present RHA member.

(a): Name and address of employer

Type of employment

Position

From

To

(b): Name and address of employer

Type of employment

Position

From

To

5. Immediate family and/or next of kin (please give details and date of birth)

(a) Name

Address

Relationship

Date of birth

(b) Name

Address

Relationship

Date of birth

6. Financial Situation Failure to give full details might delay the application

Income per week (from employment – after deduction of tax and NI)

Applicant	£	p
Spouse or partner	£	p
Occupational pension	£	p
State retirement pension	£	p
Mobility allowance	£	p
Attendance allowance	£	p
Widows pension/bereavement allowance	£	p
Service pension	£	p
Sickness benefit	£	p
Jobseekers allowance	£	p
Income support	£	p
Family allowance	£	p
Disability-related benefit	£	p
Family contributions	£	p
Sub-letting rent or paying guests	£	p
Interest from investments	£	p
Housing or council tax benefit	£	p
Help from other sources	£	p
Help from any other charity	£	p
Total weekly income:		

Expenditure per week

Rent	£	p
Mortgage repayment	£	p
Council tax	£	p
Water rates	£	p
Gas	£	p
Electricity	£	p
Other fuel	£	p
Food (for how many persons?)	£	p
Clothing (for how many persons?)	£	p
Telephone, TV, video, satellite, cable	£	p
HP payments (see question 8)	£	p
Medical and prescriptions	£	p
Social fund repayments	£	p
Motoring costs and travel	£	p
Life, contents and fire insurance	£	p
Clubs	£	p
Debts and outstanding liabilities	£	p
Any other expenses and sundries	£	p
Total weekly expenditure:		

7. Hire purchase commitments

(a) Article

Name of firm

Original cost

Amount per week

Amount outstanding

(b) Article

Name of firm

Original cost

Amount per week

Amount outstanding

(c) Article

Name of firm

Original cost

Amount per week

Amount outstanding

8. Other debts (excluding business debts)

(a) Details

Original amount of debt

Amount outstanding

(b) Details

Original amount of debt

Amount outstanding

(c) Details

Original amount of debt

Amount outstanding

9. Life assurance Have you a life insurance or endowment policy? If so, give details.

Name of company

Benefits (state amount)

10. Savings and capital

Savings and capital £

Bank and building society £

Post Office £

Investments £

11. Property

Property £

Approximate current value £

Mortgage outstanding £

Name of Building Society, etc. £

Roll number £

12. References

Names and addresses of two responsible persons to whom a request for references might be made if necessary.

(a)

(b)

13. Reason for application Please give as much relevant information as possible. Also, please list any other charities or benevolent funds approached.

14. Details of assistance required

Assistance required

Estimated costs

Own contribution or contribution from family

15. Details of previous RHA Benevolent Fund applications

Reason

Date

Amount Received

Please note that incomplete or wrongly completed forms will be rejected and sent back to you unprocessed.

The RHA Benevolent Fund will do its best to process this application within 30 days of receipt, assuming all required documentation has been included with the request for assistance. To assist you in this, set out below is a checklist of information which we MUST receive before the application is considered.

- NI number
- Date of birth
- Address/es
- Dependents
- Employment history
- Proof of employment with a past or present RHA member
- Next of kin
- Financial information
- Hire purchase information
- Other debt information
- Life insurance
- Savings and capital
- Property
- References
- Reason for application
- Assistance required
- Details of any previous RHA applications

Declaration

To the best of my knowledge and belief I, the undersigned, declare that the particulars given above are a true and accurate statement of my current circumstances.

If you are filling in this application form on behalf of the applicant please tick here

Name _____ Position _____

Signature _____ Date _____

IT IS ESSENTIAL THAT ALL SECTIONS OF THIS FORM ARE COMPLETED

Please send completed application form to:

Benevolent Fund Coordinator, RHA Benevolent Fund, Roadway House, Bretton Way, Bretton, Peterborough PE3 8DD