

# Application Form

## Electrical Safety First's Home Improvement Grants Scheme



(Funding must be used only for minor electrical works essential for electrical safety in the homes of vulnerable people – see Guidance Notes)

**Application Submission Deadline: 28<sup>th</sup> February 2019**

### A. Your Organisation's Details

1.	Organisation name:		
2.	Address:		
		<b>County:</b>	<b>Post Code:</b>
3.	Contact details:	<b>Name:</b>	
		<b>Email:</b>	
		<b>Telephone No.:</b>	
4.	Type of organisation? <small>(Tick the circle that applies to your organisation)</small>	<input type="radio"/> Not-for-profit organisation <input type="radio"/> Third sector organisation <input type="radio"/> Other (please specify) .....	
5.	How did you first hear about Electrical Safety First?		

### B. Application Details

**\*delete as applicable**

6.	How much funding do you require?		£.....
		<b>Note:</b> level of funding requested will be assessed. There is a £10k maximum cap per agency.	
7.	Briefly explain why your organisation deserves to receive grant funding (100 words)		

8.	Has your agency received funding from Electrical Safety First before?	<b>*Yes/No</b>
8.a	If 'No', please go to question 9.	
8.b	If 'Yes', please provide details.	<p>Year/s of funding awarded?</p> <p>How much funding was awarded?</p>
9.	How many enquiries does your agency receive each year for this type of works?	
10.	Does your agency currently carry out electrical safety improvement/repairs in your clients' homes?	<b>*Yes/No</b>
11.	Does your agency operate a handyperson/minor works service?	<b>*Yes/No</b>
11.a	<p>If 'No', please tell us how your agency currently manages its home improvement/repairs type work:</p> <p>i. How you identify the need for electrical safety work in clients' homes?</p> <p>ii. How you manage the work through to completion?</p> <p>iii. Number of electrical works completed for elderly clients per annum?</p>	
11.b	<p>If 'Yes', please provide details of:</p> <p>i. How you identify the need for electrical safety work?</p> <p>ii. How you currently manage the service?</p> <p>iii. Number of electrical works completed for elderly clients per annum?</p>	

12.	How does your agency currently fund home improvement/repairs type work?	
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**C. Other Information**

13.	What percentage of the population your agency covers is considered a vulnerable person?	
14.	If known, what is the average age of the housing stock in your region (tenure: home ownership)?	
15.	What is your agency's annual budget to do repairs and adaptations?	

**D. Declaration (please review Guidance Notes before completing this section)**

16.	Case Study	<input type="radio"/> Please tick if you agree to supply Electrical Safety First with at least one case study.
17.	Data Capture	<input type="radio"/> Please tick if you agree to being contacted by Electrical Safety First from time to time.
18.	Please confirm that the funding would be used solely to carry out essential minor electrical work	Signature: .....  Date: .....

Please return your completed application form to:

Neelam Sheemar  
 Stakeholder & Events Manager  
[neelam.sheemar@electricalsafetyfirst.org.uk](mailto:neelam.sheemar@electricalsafetyfirst.org.uk)