

# Croydon discretionary support (CDS)

## Application form

### Customer details

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Title (Mr, Mrs, Miss, Ms.)

First name(s)

Last name(s)

National insurance number

Phone number

Address - including postcode

How many adults including yourself live in your property?

How many children under the age of 18 live in your property?

## Money that you currently get

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Please tell us what income and benefits you and your partner, (if you have one) currently receive

**Are you currently waiting to hear about a benefits application?**

Yes

No  If no, go to question 12b

If yes, which benefits have you applied for?

**Are you currently not in receipt of benefit due to a DWP sanction or disallowance?**

Yes

No

Please explain why

## Tell us about why you are claiming

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**What help do you require? Food or fuel ( Gas and electricity)**

**Tell us what has happened that has meant you need this help**

**If you are applying for fuel , who is your energy supplier?**

## Declaration

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Even if someone else has completed this online application for you, you must sign this declaration.

Please read the declaration (below) carefully before you agree to it.

**I understand** that if I give incorrect information, Croydon Council may take actions against me. This may include court proceedings.

**I agree** that Croydon Council will use and share the information I have provided to process my claim to the Croydon discretionary support (CDS) scheme. The council may check some of the information I have provided with other sources, for example, other council departments, the Pension Service, Jobcentre Plus, HM Revenues and Customs, The Rent Service and other organisations such as government departments, local authorities and private-sector companies such as banks and organisations that lend me money, where the law allows this.

**I understand** that any award that is paid must be used for its intended purpose. Using the award for any other purposes will render me liable to prosecution.

**I understand** that I may need to supply additional information to help the council decide my application. If I fail to do this I understand that my claim may be refused.

**I know** that I must let the council know immediately of any changes to my circumstances which may affect my application.

**I declare** the information I have provided is correct.

**Print name**

**Signature**

**Date**

### Please return this form to:

Croydon discretionary support team, Bernard Weatherill  
House, 8 Mint Walk Croydon CR9 1BQ

Website:

[www.croydon.gov.uk/dsupport](http://www.croydon.gov.uk/dsupport)

Email:

[dhp2@croydon.gov.uk](mailto:dhp2@croydon.gov.uk)

Telephone:

020 8760 5719

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