



DISCRETIONARY

Funeral Grant Application Form

Providing **financial assistance** to **families**
who have lost a **family member** to **suicide**.

Organisation:  Email: grants@layboslegacy.co.uk

STRICTLY CONFIDENTIAL: The contents of this document are strictly confidential.

THE APPLICATION PROCESS

In order to apply for the funeral grant please complete the application form below. Please be aware that every application is assessed on a case-by-case basis and can take time to process.

1

Fully complete the application form and return it to us in the prepaid envelope.



2

Once received, Laybo's Legacy trustees will process your application.



3

We will review the information and contact you if anything needs clarification or is incomplete, via the email you have provided.



4

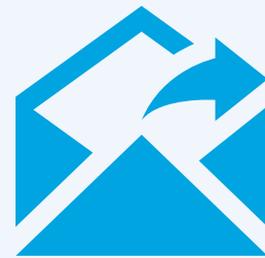
A grant outcome is then decided by our trustees, you will be notified via the email you have provided.



5

If successful the grant will be paid directly to the funeral director you have indicated on your application.

TIPS TO ACCELERATE THE APPLICATION PROCESS



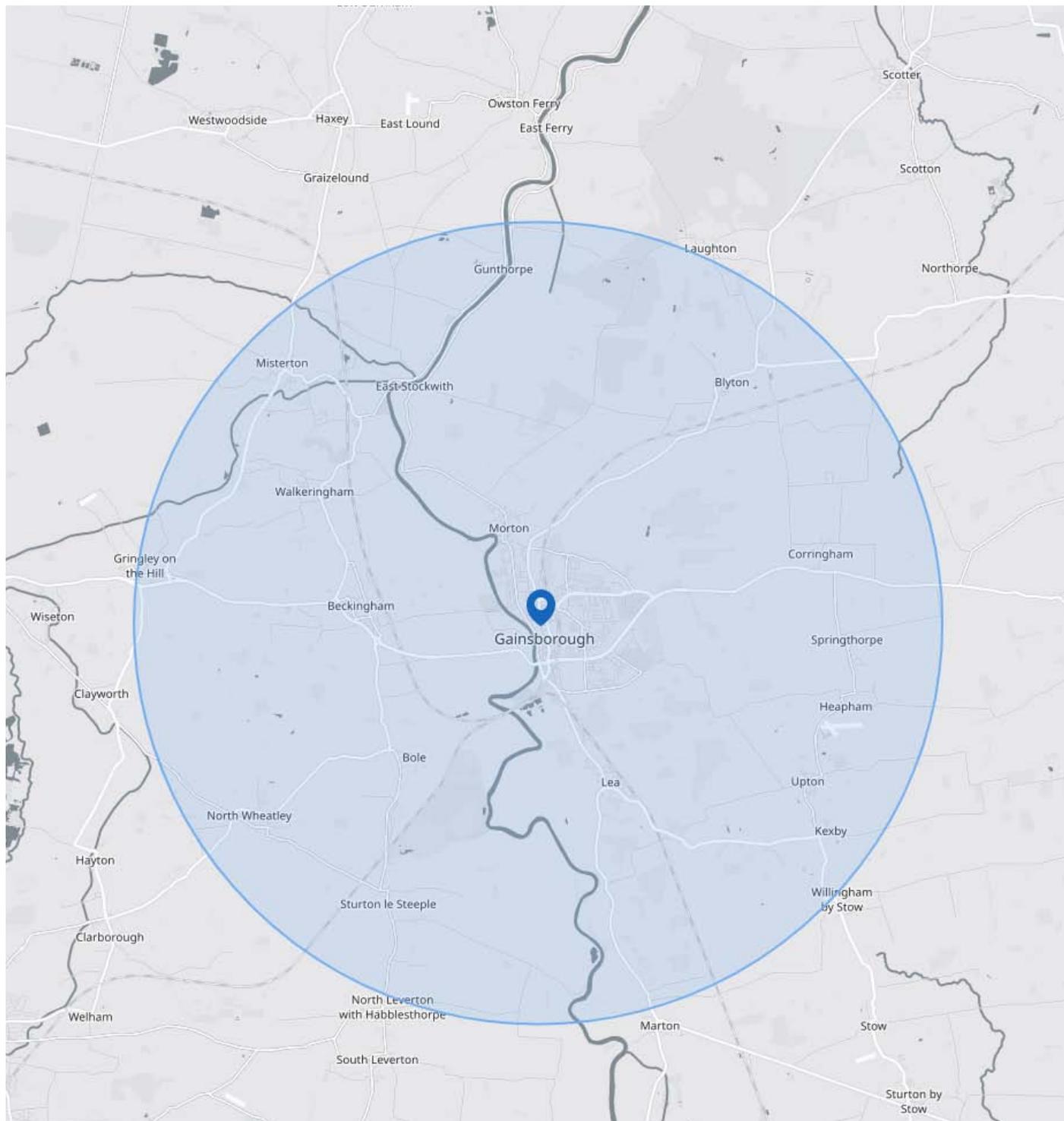
Double check that the email address you have provided is correct, as this is the email that we will use.



Ensure that all the information on the application form has been completed. We are unable to process any application with incomplete information.

GRANT CATCHMENT AREA MAP

To be considered for the funeral grant fund, the deceased must have lived in Gainsborough or within a 5 mile radius, in the last 5 years.



MAP SOURCE: Travelttime.com

THE FUNERAL GRANT APPLICATION FORM

PART ONE - About you

Trustee Notes

Title Miss/Mrs/Mr etc...

Date of Birth dd / mm / yyyy

First Name

Surname

Relationship to the deceased

Partner, parent, close relative, person responsible for the deceased etc...

Email Address

Current Address

Contact Number

Are you responsible of arranging the funeral?

yes / no

Can you confirm you are taking full responsibility of the funeral expenses?

yes / no

I give consent for you to contact me for further information if required
(please tick)

THE FUNERAL GRANT APPLICATION FORM

PART TWO - About the deceased person

Trustee Notes

Title Miss/Mrs/Mr etc...

Date of Birth dd / mm / yyyy

First Name

Surname

Date they passed away dd / mm / yyyy

Date of the funeral dd / mm / yyyy

Address at time of death

Did the deceased person live in Gainsborough or within a 5 mile radius (see map) for 5 years or more? yes / no

If no, please provide the previous address/es (covering the last 5 years)

Name and address of funeral directors you will be using?

I give consent for you to contact the funeral director above (please tick)

THE FUNERAL GRANT APPLICATION FORM

PART Three

Trustee Notes

Tell us why you need to apply for this funeral grant?

THE FUNERAL GRANT APPLICATION FORM

PART FOUR - Paying for the funeral

Trustee Notes

Are you aware of the Funeral Expenses Payment Scheme? yes / no

Have you applied for the Funeral Expenses Payment Scheme? yes / no

Have you heard back from Funeral Expenses Payment Scheme? yes / no

If YES how much have you been granted £

Did the deceased have a funeral payment plan or insurance? yes / no

Did the deceased leave a Will? yes / no

If YES will there be any assets within the estate that can be raised towards funeral costs, if so how much? £
(excludes house or items left to widow, partner or civil partner)

Cost of the funeral from the funeral director £

Amount of any other monies being received towards the cost of the funeral (For example donations, go fund me page etc...) £

PART FIVE - Consent and Declaration

Consent

The information you have provided will remain confidential and only held or disclosed to assist with this application. Laybo's Legacy processes personal data in accordance with the GDPR. Please refer to our privacy policy on our website to learn more www.layboslegacy.co.uk.

Declaration

I declare that the information provided in this application is accurate and that I have given full disclosure of my financial situation. I thereby understand that any false or undisclosed information could result in the withdrawal or repayment of any funds that Laybo's legacy may award.

Notification of Changes

I will inform Laybo's Legacy of any relevant changes in my circumstances during this application process.

Sign by

Date dd / mm / yyyy