**BURY COUNCIL, Department for Communities and Wellbeing.**

Personalisation and Support Business Team,

First Floor, 3 Knowsley Place, Bury, BL9 0EJ

**RESIDENTIAL CARE THIRD PARTY TOP-UP APPLICATION FORM**

**Care Act 2014**

When a person chooses to live in a residential Care Home that charges a higher weekly rate than the standard Council commissioned weekly rate, this is called a Top-Up arrangement. The person (resident) will have had a Financial Assessment to work out how much they can afford to contribute towards the Council’s share of the cost of the Care Home.

A Third Party (ie a person other than the resident or the Council) will be required to pay the increased weekly amount, ie the difference between the Care Home charges and the Council standard rate. The Council has to ensure the financial sustainability of any Top-Up, ie that the Third Party agreeing to pay the Top-Up can afford to make the payments for at least a period of 3 years.

This form should be completed and returned to the above address if you are applying to enter into a Third Party Agreement in order to pay the Top-Up residential care home fees.

**Please note:** a Third Party Top-Up can be a long term commitment and a default in payment could result in the Council taking legal action to recover the debt and the resident being moved to alternative accommodation.

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| **About You** | Details of the person applying to be the Third Party. |
| Title | Mr / Mrs / Miss / Ms | Marital Status |  |
| First Name(s) |  | Surname |  |
| Address & Postcode |  |
| Date of Birth |  | National Insurance Number |  |
| Name of Resident |  |
| Current Care Home |  |
| **About your Dependents** | Details of any children age 17 and under. |
| Name | Date of Birth | Age | Address |
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| **About your Employment** |  |
| Are you employed | Yes / No | What is your occupation |  |
| Name & Address of your Employer. |  |
| If you are currently Unemployed, from what date |  |
| **About your Income** | You must provide copy evidence of this (eg copy letter, payslip, bank statement) |
| Type of Income: | How Much? | How often? (ie, weekly, 4 weekly, monthly, annually) |
| Earnings (Net) | £ |  |
| State Retirement Pension | £ |  |
| Occupational / Private Pension | £ |  |
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| **About your Spending** | How Much? | How often? (ie, weekly, 4 weekly, monthly, annually) |

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| Mortgage & Council Tax | £ |  |
| Rent (after any Housing Benefit) | £ |  |
| Insurances | £ |  |
| Food | £ |  |
| Utilities / Household Costs | £ |  |
| Child Care Costs | £ |  |
| Loans / Credit Cards | £ |  |
|  | £ |  |
| **About your Savings** | How Much?  | You must provide copy evidence of this (eg bank statements) |
| Savings Accounts | £ |  |
| Investments / Stocks & Shares | £ |  |
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| **Declaration** |  |
| I confirm that the information given on this form is true and accurate to the best of my knowledge. I understand that the Council reserves the right to verify any of the information.Bury Council is committed to ensuring that we are transparent about the ways in which we use personal information and that we have the right controls in place to ensure it is used responsibly and is kept from inappropriate access, theft or misuse.  |
| Signature of Applicant  |  | Date |  |

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