



Garden assistance application form

The Garden Assistance Scheme is run by Nottingham City Council's Commercial and Neighbourhood Services on behalf of Nottingham City Homes. Please complete this form and return it to your local housing office.

The application may not be processed if all sections are not completed.

Name			
Address			
Telephone number		Date of Birth	
Email address			

Conditions

To be eligible for the Garden Assistance Scheme, you must be a **Council** Tenant:

1. In receipt of low level carers Disability Living Allowance and/or high level mobility Disability Living Allowance **or**
2. In receipt of any form of Personal Independence Payment **or**
3. Aged 70 or above **and**
4. Not have an able bodied adult living within your household
5. Not have arrears in excess of £100 (or if you do, a repayment plan must be in place that is being kept to)

Reason for requesting assistance (including any medical information)

Proof of eligibility (documents provided to us, e.g. disability allowance)

Name(s) and age(s) of any person(s) living within your household

NOTE:

If you fail to notify Nottingham City Homes or Commercial and Neighbourhood Services of any change in your circumstances which may affect your eligibility for garden assistance, you will be taken off the scheme and may be recharged for any gardening work carried out at your home.

DECLARATION

I apply for garden assistance in accordance with the conditions which I have read and understand.

Signed: _____ **Date:** _____

Would you like to discuss moving to a more manageable home **Yes / No**

FOR OFFICE USE ONLY: Please indicate by circling

REQUIREMENTS- Full service or hedges only

Tenant in receipt of low level carers DLA **Yes / No** Evidence seen **Yes / No**
And/or in receipt of high level mobility DLA **Yes / No** Evidence seen **Yes / No**

Rent is clear or payment plan is in place **Yes / No**

I have carried out relevant checks and confirm the applicant meets the criteria to receive garden assistance. **Please confirm by completing details below.**

Housing Office: _____ **HPM (print name):** _____

HPM (signature): _____ **HPM Contact number** _____

Property Ref No: _____ **DATE:** _____

Please send completed application forms to garden.assistance@nottinghamcity.gov.uk