



## APPLICATION FOR ELIGIBILITY FOR ASSISTANCE WITH GARDEN MAINTENANCE

The Housing Department provides a free grass cutting and hedge cutting service to some tenants who are unable to carry out this work themselves and have no-one else to help them. If you get Disability Living Allowance (DLA) or Attendance Allowance (AA) or Personal Independent Payment (PIP) you will need to bring proof of this when you apply for assistance. **This service cannot be offered to tenants who do not meet this criteria.**

**Please complete this form and return to Housing Service, Town Hall, Duke Street, Barrow LA14 2LD**

NAME		Date of birth	
Address		Telephone Number	

Are you getting Disability Living Allowance (DLA) or Personal Independent Payment (PIP) or Attendance Allowance (AA)?

Yes  No

Please give **brief** details as to why you claim DLA/PIP/AA and **provide proof of benefit when you return the form.**

Self \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Partner/  
occupant \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Is there anyone who can help you: ie family/friend/paid service via element of benefit? Yes  No

Please give details of anyone else living in your property:

Name	Date of Birth	Do they have disabilities?	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>

What do you need help with? *(Please mark all that apply)*

**Grass Cutting**

Front

Rear

Side

**Hedge Trimming**

Front

Rear

Side

**Please note that this service only covers:**

- Grass Cutting (monthly between April and September)
- Hedge and tree trimming (once a year in October)

If you need any other type of assistance such as weeding etc., the Housing Department will not be able to help you.

**Please give any other information which we might find useful:**


Signature: \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Authorised?

Yes

No

Details confirmed? (signature) \_\_\_\_\_ Date \_\_\_\_\_

Entered on Register?

Yes

No

Visit Required?

Yes

No

**Date Ordered** \_\_\_\_\_