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**Derbyshire Safeguarding Adults Board**

**Multi-agency Adult Risk Management (MARM)**

**Hoarding Grant Application Form**

Related Documents:

* MARM Hoarding Grant Guidance

|  |  |
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| 1. **Date of application**
 | Click or tap here to enter text. |

|  |  |
| --- | --- |
| 1. **Adult’s details**
 |  |
| **Mosaic Pin Number** | Click or tap here to enter text. |
| **MARM reference number** | Click or tap here to enter text. |
| **Name** | Click or tap here to enter text. |
| **DOB** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| 1. **MARM Chair Details**
 |  |
| **Name** | Click or tap here to enter text. |
| **Job role** | Click or tap here to enter text. |
| **Agency** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. |

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| 1. **Partner agencies involved in the MARM process.**

Please state below which partner agencies are also involved in the MARM process |
| Click or tap here to enter text. |
| 1. **Reason and circumstances for the application.**

Please include what the funds will be used for and the desired outcome |
| Click or tap here to enter text. |

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| 1. **Please confirm which of the following funding has been explored:**
 |
| **Adult** |  |
| **Landlord** |  |
| **Benevolent funding** |  |
| **Family** |  |
| **Charities** |  |
| **Other benefits or grants** |  |

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| --- |
| 1. **Contribution Amount requested – up to a maximum of £600.00 per household**
 |
| **Please provide 2 quotes for the work:** |
| **Name of business** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. |
| **Website or email address** | Click or tap here to enter text. |
| **Telephone number** | Click or tap here to enter text. |
| **Details of the work** | Click or tap here to enter text. |
| **Total cost of the work** | Click or tap here to enter text. |
|  |  |
| **Name of business** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. |
| **Website or email address** | Click or tap here to enter text. |
| **Telephone number** | Click or tap here to enter text. |
| **Details of the work** | Click or tap here to enter text. |
| **Total cost of the work** | Click or tap here to enter text. |
|  |  |
| **8. If the cost of the work is over £600, how will the additional cost be funded?** | Click or tap here to enter text. |
| **9.Outcome of the Application**For completion by the DSAB office |
| Approved or declined: |  |
| Approval date: |  |
| 1st Approver: |  | Agency: |  |
| 2nd Approver: |  | Agency: |  |

The completed application form should be emailed to:

DerbyshireSAB@derbyshire.gov.uk

For further details about the MARM Hoarding Grant process and criteria, please see the supporting practice guidance.

Please be aware that if a Hoarding Grant application is successful, but the funds have not been utilised within three months of approval, the funds will be used for other applications.

The MARM Hoarding Grant cannot be applied for retrospectively, and any invoices that are submitted for payment, where the grant has not been previously approved, will not be paid.

**Data Protection Statement**

All personal information provided to the Derbyshire Safeguarding Adults Board will be held and treated in confidence, and in accordance with the General- Data Protection Regulation (GDPR) 2016.

As part of the MARM Hoarding Grant Application process, in order to provide you with support, the information you provide may be shared with other agencies and contractors. Please tell us if you do not want us to share it with a specific organisation or company. The information you have provided will be kept safe and used only for the purpose it was supplied.

I agree to the MARM hoarding grant application being made on my and to the above information being shared in accordance with the General Data Protection Regulation (GDPR) 2016.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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