

Full Name \_\_\_\_\_



**RMBI Care Co. Resident Application Form (Part 2)**  
**Your Finances**

**Important Information**

If you are using your property to fund a permanent placement at an RMBI Care Co. Home, please complete all sections of this application.

An applicant's residency cannot commence until the application form has been fully completed and signed. This will enable us to process your application and may require further information or documents to support your application.

Once an application is made, a potential resident must not dispose of any property, assets or capital, or purchase any annuity, without disclosing this to RMBI Care Co.

If you need any support or advice completing this form, please contact the Home Manager or Business Relationship Manager at your preferred Home.

**1. Property** - Please select one of the following boxes.

- a) I / We currently own a property ☐
- b) I / We do not currently own a property but have owned (or shared part of the ownership) within the last seven years ☐
- c) I / We have not owned any property within the last seven years ☐  
(If you ticked option c, please go to Section 2.)

Full address of any property owned by you:

\_\_\_\_\_  
\_\_\_\_\_

Freehold ☐ Leasehold ☐ Estimated value in GBP:

Your share of the property: 100% or \_\_\_\_\_ %\*

*\*Please provide the details of any other parties with an interest in this property together with supporting evidence, for example, a copy of the land registry.*

\_\_\_\_\_  
\_\_\_\_\_

If the property is subject to a mortgage, please provide details of the company/or persons holding the mortgage, current redemption amount (estimated) and a copy of the latest statement:

\_\_\_\_\_  
\_\_\_\_\_

If you have entered into an equity release agreement for this property, please provide the name of the company, a copy of the agreement, and the latest statement:

If this property is currently occupied by anyone other than you, please provide their details here. Please specify if they are a partner, a relative aged over 60 years, a relative who is incapacitated, or a child who is under 16 that you support, and provide supporting documents.

Please provide similar details for any additional properties owned by you, or which you have an interest in.

**2. Income** - Please state your income after income tax or any other relevant tax.

Details about your Income	Weekly (£)	Monthly (£)
State retirement pension		
Minimum income guarantee/pension (Income support)		
Employer's pension		
Private annuities		
Attendance allowances		
Any other allowances		
Income from trust funds		
Rental income (after deduction of management cost)		
Any other income (shares, capital bonds, interests)		
Other income		
<b>Total</b>		

**3. Savings** - Please provide bank/institution details of where these savings are held.

Details about your savings	Amount (£)	Is this a joint account? (please state yes or no)
Current bank account balance		
Deposit bank account balance		
Other deposits (bank)		
Bonds		
Shares/investments		
Any other liquid assets not mentioned above		
1.		
2.		
<b>Total</b>		

**4. Debt** - Please provide the details for any amounts owed to other parties (not covered in section 1 that will not be settled within the next 30 days. If relevant, this should include any debts subject to a legal judgement or where you have taken responsibility for the debts of any other person.

Amount: £ \_\_\_\_\_

**5. Declaration** - At the time of admission, I confirm that (please tick only one option that applies overleaf.)\*

1	I agree to sell my property and enter into RMBI Care Co.'s deferred payment scheme to fund my care fees. When the sale of my property is complete, I understand and agree to pay the full care fees to RMBI Care Co. on the sale of the property. When my capital reaches the statutory threshold limit I may be entitled to support from the Local Authority.	
2	My care is being funded by the Local Authority on a 12 week property disregard. I agree to pay the difference between the gross Local Authority weekly rate payable for this period of time and RMBI Care Co.'s full weekly rate once the sale of my property is complete. From week 13, if my property is not sold, I agree to apply for a deferred payment scheme with RMBI Care Co. or the Local Authority. I understand if I undertake the deferred payment with the Local Authority they must agree to pay the full RMBI Care Co. fee or allow the full fee to come out of the proceeds of the sale of my property. I understand and agree to pay the full care fees to RMBI Care Co. on the sale of the property. When my capital reaches statutory threshold limit I may be entitled to support from the Local Authority.	

RMBI Care Co. can offer a deferred payment scheme if your property needs to be taken into account as part of your care fees. If you would like more information on its deferred payment scheme, tick here. ☐

Your Local Authority may also offer a deferred payment scheme; please contact them directly for more information. Please note that RMBI Care Co.'s full weekly rate will be payable for Local Authority deferred payment schemes.

The information on this form is correct and complete to the best of my knowledge. If applying for a respite stay, I declare that I will vacate the accommodation on the date stated. If my respite stay exceeds the stated dates, I will undertake to sign an extension to the respite stay paying in advance or a contract as a permanent resident, which will require all sections of this application to be completed. I hereby undertake to inform RMBI Care Co. promptly if any information changes.

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

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

*The witness must be an independent person and not a family member.*

Witnessed by: \_\_\_\_\_

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

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Once you have completed and signed this application form, please submit it along with the relevant documentation to the Home Manager or Business Relationship Manager.

## **PRIVACY STATEMENT**

At RMBI Care Co., we are committed to respecting and protecting your privacy. We will only use your personal information to send you information relating to RMBI Care Co. that you have requested to receive from us. Your details will be stored by RMBI Care Co. and we will continue to request consent on a regular basis. You can withdraw consent at any time by sending an email to [enquiries@rmbi.care](mailto:enquiries@rmbi.care) or by writing to RMBI Care Co., 60 Great Queen Street, London WC2B 5AZ.

We will not share your information with any third parties or store your details outside of the European Economic Area. The information you provide will be held securely by us whether the information is in electronic or physical format and we will only use your data to send you news relating to RMBI Care Co. unless you have consented otherwise.