

**Shipdham Parochial Fuel Allotment Charity**  
**Application Form for Assistance for TV Licence payments for Over 75's**

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Post Code \_\_\_\_\_ Tel. No: \_\_\_\_\_

TV Licence reference number (found on letter).....

Payment amount (found on letter) £.....

Please tick grant option: Receive by cheque  Receive by bank transfer

If you wish your grant to be paid directly into your account, please provide your bank details below (please note all applications will be destroyed in accordance with GDPR once approved at the meeting and payment made).

Bank..... Account Name.....

Sort Code ..... Account Number .....

**I certify that the information given on this form is correct to the best of my knowledge.**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**THE ABOVE INFORMATION WILL BE TREATED CONFIDENTIALLY**

Please return the completed form to one of the Trustees or Clerk.

**Trustees.**

**Helen Crane. Meadowbank, Carbrooke Lane, Shipdham. IP25 7RP. Tel: 821440**

**Sue Dewing. High Bid. Bradenham Road. Shipdham Tel: 820324**

**Steve Parfitt. 3 Townsend Place. Shipdham. Tel: 820439**

**Carole Playford: Marlowe House, The Green, Shipdham 822154**

**John Larwood**

**Lynda Turner**

**Clerk: June Smith. 10 The Green, Ashill IP25 7AT 01760 440953**