Minchin Trust caring for Anglicans in need

FINANCIAL ASSISTANCE APPLICATION

Na	ıme:
Ac	ldress:
Da	te of Birth: Telephone:
Α	If assistance is sought for dwelling improvements:
	How long have you lived in the dwelling?
	Is dwelling owned by you? Yes / No
	Is dwelling owned by a relative or family trust? Yes / No
	If owned by you, to whom will it pass upon your death?
	Are you prepared to execute a caveat in favour of the Minchin Trust for the repayment of any advance made to you? Yes / No
В	If the request for financial assistance is for other than the improvement of a dwelling, please answer the following questions:
	If you are living alone, do you have family living in Whangarei? Yes / No. Particulars if yes
	If you are living with other persons please state who they are:
	Are there any other sources of assistance known and available to you?
	Have you applied for assistance elsewhere? Yes / No
Re	equired documentation
	If requested' please provide the following
	Written verification of income source (bank statements permissible).
	• Written confirmation from your Priest that you are a practising Anglican.
Ac	cknowledgement
	I hereby acknowledge that the above information is true and accurate to the best of my knowledge.
	Signature of applicant:

Spouse's signature (if applicable):