



Fax

To: St Vincent de Paul Society – Power Assist

Fax: (08) 9475 5443 or Email: powerassist@svdpwa.org.au

(Faxing-do not attach a cover page. Emailing-please scan the account)

Before you fax please ensure you have completed all sections of this form and have attached a copy of the Applicant's Electricity Account. If any part of the form is incomplete it will be returned to you for completion before the application is processed.

POWER ASSIST ALLOCATION DATES 2011 – 2012		
July 19 th & 20 th 2011	September 20 th & 21 st 2011	November 22 nd & 23 rd 2011
January 24 th & 25 th 2012	March 20 th & 21 st 2012	May 22 nd & 23 rd 2012
*Please note: Forms received outside of these dates will not be processed.		

Applicant Details

Full Name _____ Partner's Name _____

Address _____ Postcode: _____

No of Children _____ Account Number _____

Please indicate (for caption data): E.S.B A.T.S.I. C.A.L.D.
 *Refer to 'Useful Information' section on opposite side of form for explanation of the above acronyms

Total of Applicants Bill \$ _____ (Account must be over \$100 To be eligible for assistance)

Payment Request (one of the following)

Power Assist Grant: \$ 100

Other Contributions if Applicable (please state contribution source and amount contributed):
 1. _____ 2. _____ 3. _____

Priority: 1st 2nd 3rd

From

Agency Name _____ Town/Location _____

Fax No: _____ Phone No: _____

Authorised by (Please print name) _____

Signature _____ Date _____

Authority to exchange information on my behalf

I authorise _____ to exchange information on my behalf with Synergy Power and SVDP regarding my application for assistance with payment of my Electricity account.

Applicant's signature _____ Date _____

Referring Agency will be notified of the outcome by return fax within 5 working days of receipt of application.

Power Assist Funds Available	Yes / No
Assistance Granted	Yes / No
Comment (if applicable) _____	
*Please note that the applicant may still receive an automatic reminder notice up to 10 days after the approval for assistance	

This fax may contain information is confidential. The information is intended only for those to whom it is addressed. If you are the intended recipient, you should not copy, disclose or distribute this communication without the authority of the Western Australian Council of Social Service. If you are not the intended recipient, any use of, interference with, disclosure or copying of this material is unauthorised and prohibited. If you have received this message in error, please return to SVDP on (08) 9475 5443 and then discard the message.

This is YOUR checklist - Please DO NOT Fax this page

Easy Application Instructions

Step 1 - Complete the eligibility checklist below

Step 2 - Complete the application form

Step 3 - Include a copy of the Applicant's Electricity account with the application

Step 4 - Fax completed applications to SVDP only during the specified allocation dates (08) 9475 5443 (No cover sheet please)

Eligibility Checklist

All boxes must be checked for consideration for assistance under this scheme



- Our agency confirms the Applicant is experiencing financial hardship
- Our agency is An Emergency Relief Agency/Outlet (providing some or all of the following services - assist clients to obtain food, blankets, clothes, furniture, household appliances, and/or to pay bills)
and/or
- Financial Counseling Service
- The Applicant's electricity account is more than \$100
- The Applicant has not previously received funds under this scheme during this financial year (July 2010 to June 2011).
- A payment plan has been made with Synergy for payment of the remainder of the account (this is only required in the case of large bills, overdue accounts or accounts close to disconnection).

Before you fax the application form please confirm

- All details are completed on the application form (Section 1)
- The application states a priority listing of either 1st, 2nd or 3rd
- The applicant has signed the 'Authority to Exchange Information' section of the form
- You have included a copy of the applicant's electricity account
- You have informed your client that this is an application for assistance only and that they must contact your agency in relation to an acceptance or rejection of their application

Useful information

1. Applications that do not meet the eligibility criteria may be rejected.
2. There are limited funds available for each allocation period. Confirmation of acceptance or rejection will be sent to your agency by return fax within 5 working days of the application.
3. Agencies without fax facilities can post applications to SVDP, PO Box 473, Belmont WA 6104.
4. SVDP checks all applications to confirm whether assistance has been previously been provided under this scheme during this financial year.
5. N.B. Applicant Details - E.S.B. = English Speaking Background, A.T.S.I. = Aboriginal &/or Torres Strait Islander, C.A.L.D. = Culturally & Linguistically Diverse.

 <p>wacoss</p>	<p>This scheme is funded by Synergy and administered by SVDP on behalf of WACOSS and Emergency Relief Agencies</p> <p>For further information, please contact WACOSS on (08) 9420 7222 Country free call: 1300 658 816, SVDP on (08) 9475 5423, or visit the WACOSS website. www.wacoss.org.au</p>	 <p>synergy</p>
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