

**Application for Flexible Eligibility – Energy Company Obligation (ECO) Regulations  
2018-2022 (ECO 3)**

**Part 1 – Applicant Details**

Applicant's Name	
Title (Mr/Mrs/Ms/Miss/Other)	
Address (including postcode)	
Telephone Numbers (Home and mobile)	
E-Mail Address	
Date of Birth	

Please provide the following details of the property to which the application relates:

Property Address	
Age of Property	
No of Bedrooms	

Property Type (Please circle what best describes your property)				
House	Mid Terrace	End Terrace	Semi Detached	Detached
Bungalow	Mid Terrace	End Terrace	Semi Detached	Detached
Maisonette	1 or 2 external walls	3 external walls		
Flat	1 or 2 external walls	3 external walls		
Mobile Home				

Does the applicant live in the property as their only or main residence?      Yes       No

Does the applicant have an owner's interest in the property?      Yes       No

Are you a tenant?      Yes       No

If you are a tenant at the property, please provide the details of your landlord

Landlord's Name	
Title (Mr/Mrs/Ms/Miss/Other)	
Address (including postcode)	

Telephone Numbers (Home and mobile)	
E-Mail Address	

**The company submitting this application form should always check and confirm below what evidence they have seen.**

Evidence for identity (please state form of evidence)	
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Evidence for tenancy (please state form of evidence)	
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**Part 2 - Fuel Poverty**

Does the resident meet the criteria of fuel poverty as defined in the Statement of Intent?

If there is an Energy Performance Certificate for the property, is it an:

EPC Band	Tick Box ✓	Action
E/F/G		Eligible, complete declaration
A/B/C/D		Must meet low income and high cost or 10% definition

**Pre-improvement annual energy costs at property**

**Applicant Income**

Source	Amount	Evidence Provided
Rent or mortgage payment		
Council tax payment		
Total Income less rent or mortgage and council tax payment		

**% of income spent on fuel = total income less rent and council tax/pre-improvement energy costs**



If above 10%, the household is eligible under LA Flex, if not, the household must meet both low income and high cost or low income and vulnerable to the effects of living in a cold home.

**Vulnerable to the Effects of Living in a Cold Home**

A member of the household is:

Details	Tick Box ✓	Proof Seen ✓	Print and Signed	Dated	Action
Aged over 60 (proof of age and address of person)					Go to signed Declaration
Children aged 16 or under in education and pregnant mothers (proof of age child/further education or maternity details)					

Or a member of the household has:

Health Condition – the following require a signed declaration by doctor or health practitioner to confirm any health related issues	Yes ✓	No ✓
Respiratory disease (COPD, asthma)		
Cardiovascular disease (e.g. ischaemic heart disease, cerebrovascular disease)		
Moderate to severe mental illness (e.g. schizophrenia, bipolar disorder)		
Substance misusers		
Dementia		
Neurobiological and related diseases (e.g. fibromyalgia, ME)		
Cancer		
Limited mobility		
Haemoglobinopathies (sickle cell disease, thalassaemia)		
Severe learning disabilities		
Autoimmune and immunodeficiency diseases (e.g. lupus, MS, diabetes, HIV)		

Signed declaration by doctor or health practitioner to confirm that a person or persons living at the address given in part 1 suffers from one of the conditions listed above.

Condition	Doctor	Surgery	Signed	Dated

If there is no Energy Performance Certificate for the property or the property is A, B, C or D, please complete the below table:

Question	Response	Tick Box ✓	Score
How many bedrooms are there in the home?	1		0
	2		10
	3		35
	4		55
	5		70
	6 or more		80
Are energy payments made by Direct Debit?	Yes		0
	No		15
What is the tenure?	Private rented		15
	Owner occupied		10
	Registered Social Landlord		0
	Local Authority		0
Does the home use a boiler?	Yes		0
	No		5
Was the home built before 1964?	Yes		25
	No		0
What is the main fuel type?	Mains Gas		0
	Electricity		30
	Other		15
Park/Mobile Home	Yes		50
	No		0
<b>Total score</b>			

The property has no central heating or is heated by solid fuel.  
(Properties meeting this criteria are automatically classed as high cost)

**Part 4 – Declaration**

*To be completed in respect of all applications*

**Warning: If you knowingly make a false statement you may be liable to prosecution.**

I hereby declare that the information given in this application is true and correct to the best of my knowledge:

<b>Name</b>	
<b>Signed</b>	
<b>Date</b>	

Privacy Notice

*Please insert your company's privacy notice here and ensure that you inform the applicants that the information collected on this application form will be shared with Flintshire County Council.*

**If you have any questions about the scheme, the proposed works, eligibility or related information, please contact your agent or contractor.**

Insert Company Logo Here

**Please return this form to your agent. Do not submit the form directly to Flintshire  
County Council.**