

GLOUCESTERSHIRE FLOOD RECOVERY SCHEME FOR BUSINESSES – APPLICATION FORM

Company Reference _____

Contact Reference _____

YOUR CONTACT DETAILS

Contact Name _____

Business/Company Name _____

Business address _____

_____ Postcode _____

Contact Telephone number _____ Financial Year End _____

Annual Turnover (from last annual accounts) _____ Net Profit _____

Number of Employees _____ Payroll Costs _____ Depreciation Costs _____

Do you anticipate your turnover increasing or reducing in the current year? _____

Affected business address (if different from address above) _____

_____ Postcode _____

Payment Details

Payment will be made by BACS. Please complete the following:-

Bank name _____

Sort code _____

Account Number _____

Account Name _____

Branch Address _____

_____ Postcode _____

ELIGIBLE BUSINESS

To be eligible, a business must be in a recognised flood area, be a business entity operating in the South West Region and must fit the SME criteria.

Please provide **one** of the following as evidence that your business is operational. Please tick as appropriate.

- Company registration number
- VAT registration number
Please also provide a copy of evidence to support the VAT number, eg copy of VAT registration certificate or a letter from HMRC.
- PAYE number
Please also provide a copy of your PAYE Payment booklet.
- Insurance company name and policy number
Insurance policy must be for general insurance **covering business use** or employers' liability insurance. Please also provide a copy of your insurance document.

If you are unable to provide **one** of the above, please discuss this with your Business Link Adviser.

