A logo for a company

Description automatically generated**ROUSAY, EGILSAY & WYRE DEVELOPMENT TRUST**

**EMERGENCY STAY GRANT APPLICATION FORM**

REWDT is operating an Emergency Stay grants scheme that is open to applications from residents on Rousay, Egilsay or Wyre.

* Maximum funding of up to £100 per REW resident, per year. This funding will be used to support residents with overnight accommodation costs on Mainland Orkney due to their transport to or from Orkney being delayed or cancelled by the transport operator, and therefore being unable to return home to Rousay, Egilsay or Wyre.
* This fund only applies where the transport operator or an employer does not cover the costs of the accommodation or provide you with compensation for the accommodation costs.
* Applicants must be permanent residents on Rousay, Egilsay or Wyre.
* Applicants must provide proof of the delay or cancellation and receipts for the related accommodation costs.
* Due to the nature of this grant applications can be made retrospectively but must be made within 21 days of the delay or cancellation. Funds for the accommodation costs relating to the delay or cancellation only will be reimbursed to the applicant’s bank account on production of a receipt.
* The fund will not cover food or drink purchases or other expenses unless these are included in the overnight accommodation cost (e.g Bed and Breakfast combined rate).

PLEASE PRINT YOUR ANSWERS CLEARLY:

|  |  |
| --- | --- |
| **Applicant Name**: |  |
| **Address:** |  |
| **Tel No:** |  |
| **Email:** |  |

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| **Transport delay/cancellation details: (Please include reason for delay or cancellation).** |
| **Flight/Ferry Operator:**  **Date and Time of booked transport:**  **Delay or cancellation details:**  **Please submit a copy of the delay or cancellation notification from the transport provider.** |

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| **Emergency Accommodation details:** |
| **Accommodation Name:**  **Accommodation Address:**  **Please submit a copy of the accommodation receipt/invoice.** |

**I confirm that the delay or cancellation resulted in incurring an overnight stay cost as**

**I could not return to Rousay, Egilsay or Wyre.**

**I have included a copy of the delay or cancellation notification and the related**

**accommodation costs receipt.**

**I have read and accept the Emergency Stay Grant Terms & Conditions**

**Declaration by Applicant:**

**By completing this form, I agree for my personal data to be held for use in connection with this grant, until the grant is closed either by completion, ineligibility, or because I/we/the organisation no longer wish to proceed with the application.**

|  |  |
| --- | --- |
| **Signature:** | |
| **Name:** |  |
| **Signed:** | **Date:** |

Please return the completed form to REWDT, Pier Cabin, Rousay, KW17 2PU or email togrants@rewdt.org