

# RSPCA SOUTH BUCKS

## Welfare Assistance Application Form

To help us move your application forward quickly, please make sure you answer all questions in this form as accurately as possible and upload the relevant proof.

Please be aware that you are required to make a contribution towards the cost of veterinary treatment, normally 50%, and you must be confident that you can meet your pet's long-term care needs.

We recommend discussing this with your veterinary practice as they may be able to offer a payment plan for your contribution or for ongoing costs.

Please note that we are only able to provide one time assistance for your pet. If you have multiple animals we are only able to assist you once.

We are unable to offer support for these categories:

- Vaccinations
- Dog neutering (unless medically necessary, e.g., pyometra)
- Routine and general health checks
- Routine dental work (apart from urgent or accidental damage e.g., if your animal can't eat. We are unable to cover routine dental treatment such as cleaning or general tooth decay)
- Grooming
- Microchipping
- Flea/worm treatments (other than if required as part of a wider issue)
- Specialist food
- Ongoing medication or regular check ups for specific known medical conditions e.g., thyroid, diabetes etc.

We aim to make this form accessible to everyone. If you need any assistance filling in this form, our welfare team is here to help. You can reach them on [07342 289365](tel:07342289365) or at [welfare@rspca-southbucks.org.uk](mailto:welfare@rspca-southbucks.org.uk).

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### 1. Eligibility Assessment

What is your total annual household income of **all** members of your household? This includes payment from work, benefits, pension or other forms of income for **all** working adults in the household.

- Under £35,000 (Less than £3000 per month)
- Over £35,000 (More than £3000 per month)

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### 2. Applicant Details

Full name:

Address:

Postcode:

Phone number:

Email address:

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## 3. Animal Details

**Animal name:**

**Species:**

**Breed (if known):**

**Age:**

**Gender:**

**Is this the first time you have applied for financial assistance from us?**

- Yes
  - No (We can only assist once)
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## 4. Treatment Information

**Name of veterinary practice:**

**Has your animal already seen a vet about the current problem?**

**Description of the condition or treatment required - please provide as much detail as possible**

**Estimated cost of treatment (if known):**

**Have you contacted other vets to get a comparable price for the treatment? If not, we recommend that you do so as prices can vary.**

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## 5. Proof of income

**Are you currently receiving any of the following benefits, please select all that apply.**

- Universal Credit
- Housing Benefit
- Pension Credit
- None of the above

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Please upload the following documents as proof of your household income, *including* the first page showing your name and address:

1. The latest month payslips for **all working adults** in the home
2. Benefits statements for **all members of the household**:
  - Your full Universal Credit statement (usually 4 pages)
  - Your full Housing Benefit award letter
  - Your full Pension Credit letter

## Data protection notice

By requesting financial assistance towards the cost of veterinary treatment for your pet, you agree that we may check your financial eligibility. To do this, we will review the payslips and/or benefit statements you provide. These documents are used solely for assessing eligibility and will be deleted once this check is complete. We do not retain these documents, and we do not share your information with any other organisation, including your veterinary practice.

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## 6. Declaration

Please confirm the following:

- I understand that RSPCA South Bucks can only assist me on one occasion.
- I understand that I am required to make a contribution towards the cost of treatment, this will normally be 50% of the cost\*.
- I confirm that all of the information I have provided is accurate and the documents provided accurately represent my household's total income including all working age adults in the home.
- I understand that I may be asked for additional evidence if needed.
- I understand that I am encouraged to arrange pet insurance or set aside savings for future vet bills.

**Signature (typed name):**

**Date:**

\*In exceptional circumstances, we may be able to contribute more but this will require prior agreement by the RSPCA on a case-by-case basis.

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## How to Submit

Please email your completed form and supporting documents to: [welfare@rspca-southbucks.org.uk](mailto:welfare@rspca-southbucks.org.uk)