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| --- | --- |
|  | A colorful letter on a black background  Description automatically generated |
|  | **Fuel Fund Fusion 21 Referral Form** | |  |
|  | |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | | | | | | | | | | Date |  | Agent/Representative Name | | | | | | | | | |  | | | | | |  |  | | | | | Resident Name | | | | | |  | Organisation/Dept | | | | | Resident Information | | | | | | | | | | | |  | | | | | | | | | | | |  | | |  | |  | | |  | |  | | Home phone number | | | | Mobile number | | | | | Email address | | |  | | | | | | | | | | | | Address Post Code | | | | | | | | | | | |  | | |  | |  | | |  | |  | | DOB | | |  | | Gender | | |  | |  | |  | | | | | | | | | | | | **Debt on Account (Amount) Energy Supplier** | | | | | | | | | | | |  | | | | | |  |  | | | | | Residents Energy Account reference number | | | | | |  | Resident Energy Bank account details | | | | |  | | | | | |  |  | | | | | Benefits/ income/ Employment | | | | | |  | No of people in household | | | | |  | | | | | |  |  | | | | | Physical or mental health condition (Yes/No) | | | | | |  | Evidence required (Energy bill must be 3 within the last 3 months | | | | |  | | | | | |  |  | | | | |  | | | | | |  |  | | | | | |  |