

Claim for payment of Financial Assistance Lease Regularisation costs

Under the General Practice Forward View, I hereby apply for financial assistance in respect of costs associated with the completion of a formal lease with the NHS Property Company as detailed below.

Contractor / Practice name:	
Practice Number:	
Address of premises covered by this claim:	
Landlord details	
Term / Length of Lease agreed	
Lease Completion date	
Lease Registration date	

Date of completion of work	Description of work and of fees	Total cost	Cost on which grant is claimed	Confirm Evidence of costs attached
		£	£	
	Stamp Duty Land Tax (claims will be reimbursed to a maximum initial lease term of 15 years)			
	Legal Fees (max £1000 plus VAT)			
Total claim			£	

Certification

I/We certify that:

- a The Lease of the premises noted above as completed on _____ (*insert date*) in accordance with part 2 of the National Health Service (General Medical Services-Premises Costs) (England) Directions 2013 has been satisfactorily completed.
- b All professional fees and liabilities have been paid by me/us and receipted bills are attached.
- c No part of the cost of on which grant is claimed has been or will be included in tax allowance claims.
- d A copy of the completed and signed lease is attached for reference

Signed by the Partners of the Practice	Print Name	Date

Please submit the completed form to the New Models of Care Team, Hull CCG Phil Davis philip.davis@nhs.net or Nikki Dunlop Nikki.dunlop@nhs.net

The application will be formally reviewed and considered by the Primary Care Commissioning Committee, Hull CCG. On approval, an allocation of funds will be made to reimburse the practice. The practice will be notified in writing within 10 days of the committee's decision.

Commissioner Use

Date	Received by	Action

Approval

Costs awarded		£
Date	Name	