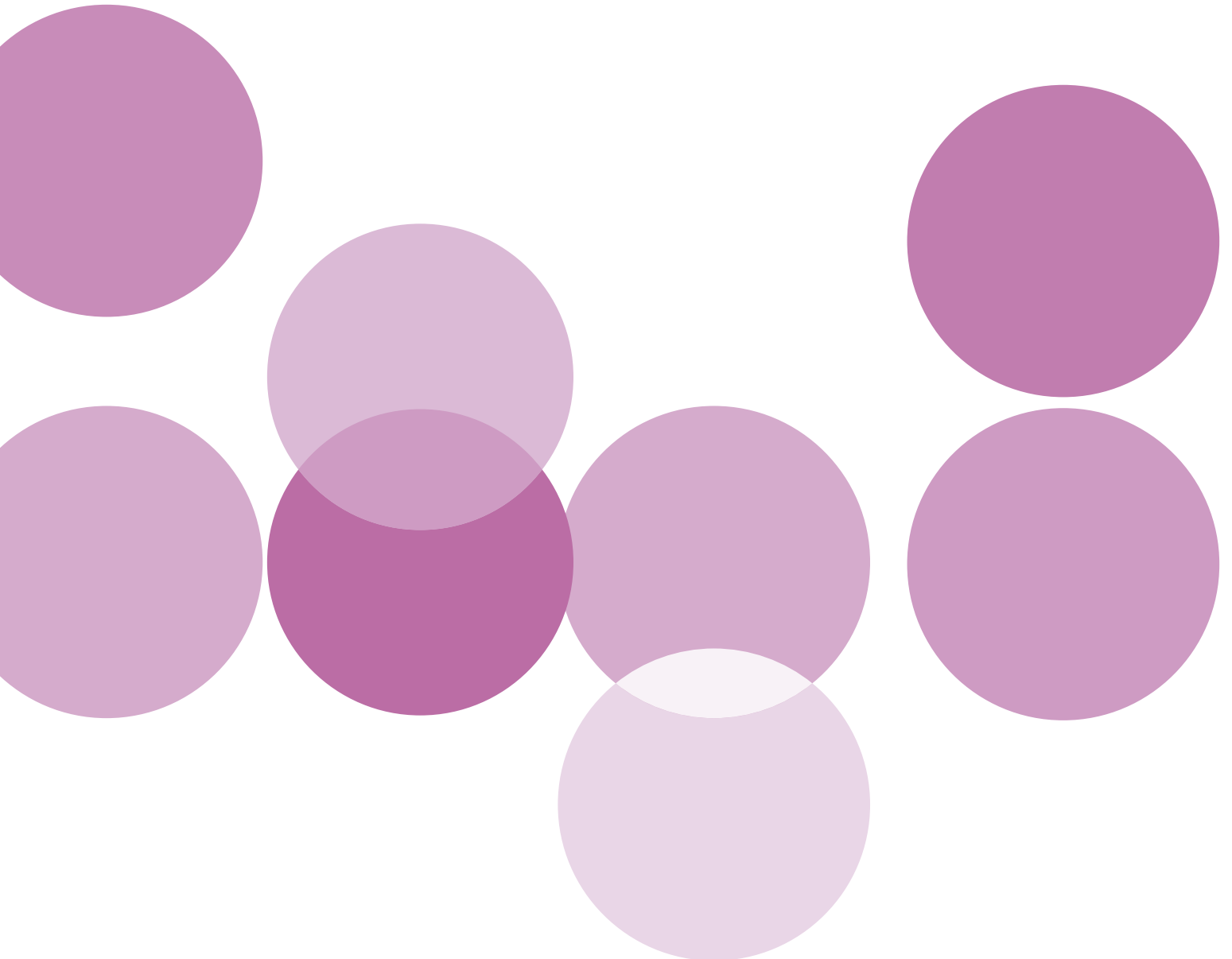



# Variation of Transactions ATF(5)

Notes to complete  
Application Form



## Other application forms available in this series:



- Organisations - Fitness to Access Funds 
- ATF(1) – Request Account information 
- ATF(2) - Access to Funds 
- ATF(3) - Additional Joint Withdrawers 
- ATF(4) - Reserve Withdrawer 
- ATF(6) - Renewal of Authority 
- ATF(7) - Transition of Authority 

# Notes to complete this Form



This form should only be used where an access to funds is already in place and there is a need to vary the existing transactions or the withdrawer wishes to apply to carry out other financial transactions not originally identified.

If you require assistance to complete this form please contact the Office of the Public Guardian (OPG) where staff will be happy to help. Applicants should refer to the code of practice for access to funds when considering making use of this scheme.

**Section 1** requests details of the existing authority. There is no requirement to duplicate details of the other interested parties, for example, nearest relative, primary carer etc. However, where personal details of such interested parties have changed this should be shown in section 1.2.

Part A of section 2 should only be completed if you wish to vary existing transactions which have already been authorised.

**If Part A** requires to be varied the applicant must identify the anticipated ongoing expenditure required to meet the adult's financial needs and complete the appropriate section. It is important to consider what standing orders/direct debits may exist on the adult's current account. If you wish such to cease you must identify them in this section otherwise they will continue to be paid when your new certificate is produced to the fundholder. Equally you may set up new arrangements for standing orders/direct debits for the regular payment of sums from this account. The Public Guardian reserves the right to request further information or evidence to support your application.

Where you need to vary the anticipated ongoing expenditure you should remember to take inflation into account.

The examples below show how this can be done.

**Example 1:** If the adult pays rent, currently payable at £100 monthly and calculated at £1,200 in year one (£100 x 12 months), you may wish to allow £1,360 to cover potential increase in year two and possibly £1,580 for year three. This would total £4,140 over the period of three years. Therefore you may wish to request £115 per month (£4,140 divided by 36 months) for rent in your application form. You should apply the same logic in terms of each heading. If you are not sure the staff at this office will assist.

**Example 2:** If the adult is in a care home and costs are currently payable at £250 weekly that would work out at £13,000 in year one (£250 x 52 weeks). If you estimate that costs might go up by approximately 10%, in year two you might expect the annual cost to be £14,300 and in year three this figure might be £15,730. So over the three year period you may require £43,030. This could be rounded up to £43,200 to cover the full three years, which divided by 36 (months) would be £1,200 monthly.

It is also possible to apply for a further lump sum where there has been an unexpected but necessary purchase required which will be of benefit to the adult. Generally, where requested, the Public Guardian will expect to see evidence of its purpose in the form of an invoice or similar. An example of the need for a lump sum is shown below.

**Example:** The withdrawer finds that remedial work requires to be carried out on the roof of the adults home. The Public Guardian would expect to see three written quotes providing a breakdown of the work to be done together with the withdrawer's preferred option and explanation thereof before approving the lump sum in this instance.

The amounts requested do not need to be exact but it is important to be sure that there will be sufficient money in the designated account to ensure the adult is provided for using his or her funds. Over estimating, within reason, will not be seen as detrimental to the adult.

The Public Guardian may request to see some form of evidence of anticipated expenditure, for example, utility bills, care home invoices etc as part of the application process.

**Part B** allows for other financial transactions which are:

- Request to transfer a specific amount of funds from the adult's current account to the designated account other than what has been identified in Section 2.1.1; 2.1.2 and 2.1.3;
- You may transfer a specific amount of funds from the adult's current account to the adult's second account;
- You may transfer a specific amount of funds from the adult's current account, provided it is an original account, to any account as specified;
- You may transfer a specific amount of funds from the designated account to the adult's second account;
- You may transfer a specific amount of funds from any original account in the adult's sole name to the designated account, to the current account, to the second account or to any other such account as identified;
- Where the second account is a new account you may only transfer funds therefrom to the designated account;
- You may close any original account; and
- You may terminate an arrangement for payment of funds from any existing account and if needed re-establish the arrangement on the adult's current account or the designated account.

Staff in the Office of the Public Guardian (OPG) will be happy to discuss the adult's financial needs with the withdrawer at any time.

This part allows for an existing account to be identified as the adult's second account or an account to be opened for that purpose if there is no such suitable account. A second account must be in the adult's sole name. If this account is an existing account it is important to consider what standing orders/direct debits there are on the account. If you wish such to continue you must identify them in this section otherwise they will cease to be paid when access to funds commences.

It also allows for the termination of any arrangement for payment of funds from any existing account; the closure of any original account in the sole name of the adult and the transfer of specified sums from particular accounts. Section 2.2.2 in this form specifically identifies the parameters.

**Section 3** contains an undertaking and declaration which must be read carefully by the applicant and any other joint withdrawers, who should all sign and date the application form.

**Use the checklist located near the end of the application form to ensure you have completed all the information requested and then send your application to the Public Guardian.**

**A fee is payable for this application and cheques should be made payable to the “Scottish Court Service”. Details of current fees can be obtained from the OPG or from our website.**

Office of the Public Guardian (Scotland)  
Hadrian House  
Callendar Business Park  
Callendar Road  
FALKIRK, FK1 1XR

DX: 550360 Falkirk 3  
LP: LP-17 Falkirk

- Telephone: 01324 678300
- Fax: 01324 678301
- Email: [opg@scotcourts.gov.uk](mailto:opg@scotcourts.gov.uk)
- Website: [www.publicguardian-scotland.gov.uk](http://www.publicguardian-scotland.gov.uk)

The office of the Public Guardian (OPG) is open to the public from 9am to 5pm, Monday to Friday.

This leaflet is available free of charge in Braille, audiotape large print format, and various non-English languages by phoning the above telephone number. The OPG subscribes to Language Line and the RNID Typetalk service.





# Variation of Transactions ATF(5) Application Form

## Section 1 – Personal Information

### Section 1.1 – Details of Existing Authority

The information required below can be obtained from your certificate of authority.

PUBLIC GUARDIAN'S REF:

PG/

NAME OF ADULT:

NAME OF WITHDRAWER(S):

### Section 1.2 – Other Interested Parties

In the original application the identity of the adult's:

- Nearest relative;
- Primary carer;
- Named person;
- Welfare attorney/guardian; and
- Any other interested party

were provided.

There is no requirement to provide this information again, however, if for any reason, their details have changed and you have not already notified the Public Guardian you should do so below:

**You should note that a copy of this application form will be sent to the individuals you identified in your original application, unless notified otherwise. This is to allow them the opportunity to make comment, or indeed object, if they wish, to your proposals. This is a requirement of the legislation.**

# Section 2 – Financial Transactions

## Part A – Variations to Basic Financial Transactions

(Only complete Part A if you wish to vary existing transactions which have already been authorised)

### Section 2.1.1 - Use of Funds

Since your original certificate was granted, the adult's circumstances or living costs may have changed. If that is the case, you should identify below what finances are now required to meet the adult's ongoing financial needs.

Before completing this section it is important to refer to the accompanying notes to complete this application form. This will tell you how to calculate the anticipated expenditure and what supporting evidence may be required.

Reason for Expenditure	Monthly Amount £
Gas	
Electricity	
Telephone (inclusive of mobile phones and special telephone services)	
Mortgage	
Rent	
Insurances (building, contents, motor, personal, pets etc)	
Council Tax	
TV Licence	
Care Charges	
Loan Repayments	
Club or other subscriptions	
Food and household expenses	
Clothing	
Holidays/Outings	
Transport costs	
Other (Please specify)	

TOTAL MONTHLY AMOUNT £

## Section 2.1.2 – Details of any Existing Direct Debits/Standing Orders in the adult’s current account which you wish to cease or to set up

Detail existing standing orders/direct debits set up on the adult’s current account which you wish to cease or identify those which you wish to set up on the above account.

Name of Company to whom payment is currently made for example, Scottish Power etc.	Amount payable monthly £
Cease:	
Set Up:	

## Section 2.1.3 - One off Lump Sum

The access to funds process not only allows for regular ongoing expenses to be taken but also allows for a one off lump sum to be requested. A lump sum payment may already have been authorised but in certain circumstances it may be possible for a further single payment to be made. Before completing this section it is important to refer to the accompanying notes to this application form. This will tell you what supporting evidence may be required.

Do you require a lump sum?

If Yes Complete below      If No, go to Part B

Reason for Expenditure	Amount £
One off payments/lump sums (Please specify)	

TOTAL LUMP SUM £

## Section 2.1.4 – Account from which Lump Sum will be Transferred

If the lump sum requested is to be transferred from the adult's current account please leave this section blank, otherwise identify the account from which the lump sum is to be transferred.

Name of Bank/Building Society:	
Branch Name:	
Number:	
Street:	
Locality:	
City:	
County:	
Country:	
Post Code:	
Sort Code:	
Name of Account Holder:	
Account Number:	

You may now apply for authority to carry out more advanced transactions or you can do so at a later date using this form if required.

Do you wish to apply for authority to carry out other transactions now?

If Yes Complete Part B      If No, go to Section 3 – Undertaking and Declaration by Applicant

## Part B – Other Financial Transactions

(You should only complete this part if you wish to do more than the basic transactions as identified in Part A)

### Section 2.2.1 – Second Account

In addition to the adult's current account it is possible to identify an existing account or open another account in the adult's sole name which will be known and operated as the adult's second account. It may be that there are funds in other accounts which would benefit from being placed into this second account.

Does the adult already have a bank account in his/her sole name which you would wish to operate as a second account?

If Yes, please provide details below.

Name of Bank/Building Society:	
Branch Name:	
Number:	
Street:	
Locality:	
City:	
County:	
Country:	
Post Code:	
Sort Code:	
Name of Account Holder:	
Account Number:	

If No, do you wish authority to open a second account in the adult's sole name?

If you wish authority to open a second account in the adult's sole name please supply information in the box below.

Name of Bank/Building Society:	
Branch Name:	
Number:	
Street:	
Locality:	
City:	
County:	
Country:	
Post Code:	
Sort Code:	
Name of Account Holder:	
Account Number:	

## Section 2.2.2 – Transfer of Funds on Existing Accounts

Where the adult has several accounts it may be that you need to transfer funds between accounts, close accounts or terminate direct debits/standing orders etc. There are a number of options available and you should consider these carefully but note that you cannot do so without approval of the Public Guardian. The options are:

- Request to transfer a specific amount of funds from the adult’s current account to the designated account other than what has been identified in Section 2.1.1; 2.1.2 and 2.1.3;
- You may transfer a specific amount of funds from the adult’s current account to the adult’s second account;
- You may transfer a specific amount of funds from the adult’s current account, provided it is an original account, to any account as specified;
- You may transfer a specific amount of funds from the designated account to the adult’s second account;
- You may transfer a specific amount of funds from any original account in the adult’s sole name to the designated account, to the current account, to the second account or to any other such account as identified;
- Where the second account is a new account you may only transfer funds therefrom to the designated account;
- You may close any original account; and
- You may terminate an arrangement for payment of funds from any existing account and if needed re-establish the arrangement on the adult’s current account or the designated account.

You should identify the accounts below and thereafter give specific details of what you want to do with each as allowed for above:

	Transfer From:	Transfer To:	Amount £
Bank/Building Society:			
Sort Code:			
Account Holder:			
Account Number:			

Please identify any standing orders/direct debits currently existing on the above account which you wish to retain, terminate or re-establish:

Name of Company to whom payment is made	Amount Payable	Retain YES/NO	Re-establish on Adult’s Current Account YES/NO	Re-establish on Designated Account YES/NO

Do you wish to close the above account?

	Transfer From:	Transfer To:	Amount £
Bank/Building Society:			
Sort Code:			
Account Holder:			
Account Number:			

Please identify any standing orders/direct debits currently existing on the above account which you wish to retain, terminate or re-establish:

Name of Company to whom payment is made	Amount Payable	Retain YES/NO	Re-establish on Adult's Current Account YES/NO	Re-establish on Designated Account YES/NO

Do you wish to close the above account?

	Transfer From:	Transfer To:	Amount £
Bank/Building Society:			
Sort Code:			
Account Holder:			
Account Number:			

Please identify any standing orders/direct debits currently existing on the above account which you wish to retain, terminate or re-establish:

Name of Company to whom payment is made	Amount Payable	Retain YES/NO	Re-establish on Adult's Current Account YES/NO	Re-establish on Designated Account YES/NO

Do you wish to close the above account?

If there are more accounts identified please use an additional sheet.

**All applicants must now complete Section 3**

# Section 3 – Undertaking and Declaration

## Section 3.1 - Undertaking

I understand that it is my responsibility to keep records of the exercise of my powers as withdrawer and to notify the Office of the Public Guardian directly and immediately of any change of circumstances involving myself or the adult for example, change of address or death of the adult etc.

I undertake to:

- a) operate the designated account solely for the purpose of receiving funds transferred under the authority of any certificate granted and intromitting with those funds; and
- b) operate any accounts in the sole name of the adult as directed by my certificate of authority.

## Section 3.2 – Declaration

I declare that all information contained in this application is true and correct to the best of my knowledge and I understand that false or misleading information may lead to the rejection of this application or the termination of any authority already granted.

I confirm that the Office of the Public Guardian is authorised to contact appropriate bodies as it sees fit in order to seek such information as they consider reasonable in pursuance of this application.

## Section 3.3 – Data Protection/Use of Information

The Office of the Public Guardian will retain and process the information provided herein on computer. This processing is necessary for the exercise of the statutory functions conferred on the Public Guardian by the Adults with Incapacity (Scotland) Act 2000. By signing below I understand that I consent to this information being processed, stored and used by the Office of the Public Guardian in the discharge of its function.

SIGNATURE OF MAIN  
WITHDRAWER:

--	--

PRINT NAME:

--	--

DATE:

--	--

SIGNATURE OF OTHER  
IDENTIFIED WITHDRAWER(S):

--	--

PRINT NAME(S):

--	--

DATE:

--	--

**Once the application form has been completed you should lodge it with the Office of the Public Guardian within 14 days of the document being signed and dated.**



# Checklist For Applicant

Have you completed all the relevant sections.

Have all persons signed and dated the form.

Has evidence been enclosed to support your request for funds.

Have you enclosed the relevant fee. Your cheque should be made payable to the "Scottish Court Service".

Is the application form being submitted to the Public Guardian within 14 days of the date it is signed by the applicant.