

**Appendix B2**

To *Team Manager* (Insert as  
*Locality Office Name and Address* (appropriate

12 Week Property Disregard

1. In connection with my permanent admission to a Residential / Nursing care home, I wish to have the value of my former home disregarded from my assessed contribution for a period of 12 weeks or until the date it is sold whichever comes first.
2. I understand that during the period referred to in '1' above, I will have to make a contribution toward the cost of my accommodation and that it will be based upon my income and other capital assets.
3. I understand that if the cost of my accommodation is more than Devon County Council would normally pay to meet my needs, then I or someone else on my behalf will have to pay the difference, in addition to the assessed contribution referred to in 2 above.
4. I understand that at the expiry of the 12 week period or from the date that the property is sold, whichever happens first, I will be responsible for paying the full cost of my Residential / Nursing Care Accommodation.

Signed.....  
Print name.....  
Date.....

When signed, please return this agreement to the above address as quickly as possible.