

HOME IMPROVEMENT AGENCY REFERRAL FORM

MAJOR ADAPTATION



DFA to Council Property

☐

PRIORITY

☒

STANDARD

☐

Informed about Right to Control

☐

Substantial Advice visit request

☐

DFG Applicant

☐

PRIORITY

☐

STANDARD

☐

Right to control leaflet given

☐

Reviewed by DS Care Funding Panel

☐

Date of Enquiry to DS

Date of Assessment

Assessed by(please print)

Date of referral to HIA

26.05.2021

05.07.2021

Val Sparkes

20.07.2021

Name

Mohammed Haroon- Khan

Address 18 Dudley Ave; Whitefield

Postcode

M45 6BS

Tel 07575062997

***Name and contact of property owner (if this differs from above):

Source of enquiry

Method of Enquiry

Nature of Enquiry

Gender

M

Date of Birth

06/06/2014

Ethnicity

C3

Health – please tick one only

☐ Physical disability?☐ Registered disabled?☒ Learning difficulties?☐ Chronic ill health?☐ Mental health problems?☐ AIDS/HIV☐ Sensory Impairment☐

Property tenure

☐ Owner occupier☐ Other☒ Local Authority tenant☐ Private tenant☐ Housing Association

Property type

☒ Terraced with front garden access☐ Terraced without front garden access☐ Semi detached property☐ Detached Property☐ Bungalow☐ First floor flat☐ Ground floor flat☐ Other (please specify)

x CHILD.

Please note shaded boxes are completed by the HIA Case ID number

Recommendation following assessment:

Feasibility to look at:

Ground floor bedroom and wet room
Safe play area
Safety locks

Authorised by: (please print)

Signature:

Date:

Date of first contact with customer

Date of first visit to customer

Date tenders sent

Tender return date

Date work instructed

Target completion date

Contractor

Date work instructed

Practical Completion

Speed of Service

Disabled Facilities Officer