

Assessment Form
Home and Garden Maintenance Services

Please fill in form and send to the Men's Shed email: nannup@wamsa.org.au

Surname/Family name:

Given names:

Address:

Age: _____

Gender: Male

Female

Current situation

Lives Alone? Yes No

Lives with Spouse/partner/family (please circle)

<u>Name</u>	<u>Relationship</u>	<u>Phone</u>	<u>Capacity to Help</u>

Pets -what pets are at the property?

Other information

Services Required

*All services are based on Health and Safety needs.

Details

Basic Gardening <input type="checkbox"/>	
Light bulbs changed <input type="checkbox"/>	
Smoke detectors changed/batteries changed. <input type="checkbox"/>	
Fire wood <input type="checkbox"/> Chop <input type="checkbox"/> Supply <input type="checkbox"/>	
Clean windows <input type="checkbox"/>	
Take bins out <input type="checkbox"/> (Temporary service for post-surgical/illness recovery)	
Security checks/door locks <input type="checkbox"/>	

Replace small items e.g. Tap washer

Minor carpentry repairs-specify

Other: Please specify