

Home and Garden Maintenance Services
Application form

Surname/Family name:

Given names:

Address:

Phone:

Home: _____ Mob: _____

Age: _____

Gender: Male

Female

Next of Kin:

Name:

Relationship: _____ Ph.Home: _____

Mob: _____ Email: _____

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

Are you currently receiving services from any of the following?

- Nannup Community Care

Details _____

- Other

Details _____

Any other

Information _____

Services Required

*All services are based on Health and Safety needs.

Details

Basic Gardening <input type="checkbox"/> (Does not include lawn mowing)	
Light bulbs changed <input type="checkbox"/>	
Smoke detectors checked/batteries changed. <input type="checkbox"/>	

Fire wood <input type="checkbox"/> Chop <input type="checkbox"/> Supply <input type="checkbox"/>	
Clean inaccessible 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 <input type="checkbox"/> e.g. Tap washer	
Minor carpentry repairs: Please specify <input type="checkbox"/>	

Other: Please specify

I agree to receive services from Nannup Home & Garden Maintenance. I acknowledge my information may be passed on to Nannup Community Care for assessment purposes.

.....
Name

.....
Signature

.....
Date

Please fill in the form and return to one of the following.

Nannup Shire, Adam St Nannup. Ph. 97561008.

Nannup CRC, Warren Rd, Nannup. Ph. 97563022

Email to the Men's Shed on nannup@wamsa.org.au.