GUARDIANSHIP-TOGETHER FOR THE COMMUNITY



BY SUPPORT&MATCH CIC

ROOM OUT?

Householder Guardianship Registration Form

Please complete all the sections of this for		DATE OF REGISTRATION		
PROPERTY REQUIREMENTS				
Do you have a valid Energy Performance Certificate for this property?	YES	NO		
If you do not have a certificate, are you willing to getone?	YES	NO		
Is your property Legionnaires disease free?	YES	NO		
Do you have a valid Gas Safety certificate for this property?	YES	NO		
Can you supply a working smoke and carbon monoxide alarms?	YES	NO		
If provided is the furniture fire resistant?	YES	NO		
Are all the electrical appliances and plug sockets safe and compliant?	YES	NO		
Do you have an HMO or selective licence?	YES	NO		
Do you own the property?	YES	NO		
IF NOT DO YOU HAVE PERMISSISON TO RENT A	YES	NO		

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HOUSEHOLDER PERSONAL INFORMATION

Full Name:	
Last name:	
Date of Birth:	
Gender:	
Address:	
Post Code:	
Telephone Number:	
Size of the spare room/s:	
Is there a private bathroom?:	
Couple/Single:	
Do you agree for Support& to process a basic DBS ch For this purpose you will n	
Do you have any health co	nditions?
Do you have any food aller	gies?
Do you have any pets?	
Do you mind sharing with	someone with pets?:

Please once you submit this form provide a picture of the accommodation you are offering by email at info@supportmach.co.uk

Please Note: Guardians are fully working or studying individulas who will offer you a little help (3 hours per week) in their spare time. The help can only be general domestic help, companionship and overnight security. Please be mindful of taks you might ask the Guardian to help you with.

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OTHER INFORMATION:	
If you are applying on behal	If of someone else please complete the section below:
Full Name:	
Full Address:	
Email Address:	
Telephone Number:	
Polationahin to the Househ	oldon.
Relationship to the Househout whose did you have about w	
Where did you hear about u	5?.
If my application is success	sful, I agree to:
To respect and abide by th	ne Support&Match CIC Licence agreement
	nent fee of 18% which will be deducted monthly from to total licence fee ne accommodation I provide
For Support&Match CIC to	record my personal data for office use only
I have understood the abov	re information and that the information I have given is correct
I declare I have no unspen	t convictions.
I have read understood a	nd accepted the Terms of Service.
i daa, anaoi oto ou, ui	and a property with a contract of the contract
Signature:	THANKYOU FOR YOUR REGISTRATION

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If you wish to p the box below	rovide further information with regards to the accommodation or yourself pleas	se use