Self-assessment Form for Minor Adaptation in Council Properties

If you feel that you require a minor adaptation to your home, please complete this application form. Please mark option boxes with a X.

Part 1. Contact Details		
Title:	Forename:	Surname:
Address:		
Contact Number:	Email:	
Date of Birth:		

Part 2. Reason for Request

Part 3. Social Work Details		
Currently known to social work?	☐ Yes	☐ No
If yes, name of the social worker:	Full Name	

Part 4. Property Details – please indicate the number of steps into and around your home			
Internal stairs	☐ Yes	☐ No	If Yes, number ☐☐
External stairs	☐ Yes	☐ No	If Yes, number ☐☐

Part 5. Type of works requested – please complete applicable boxes				
☐ Additional banister	☐ Straight stair	☐ Curved stair	☐ RHS	☐ LHS
Internal handgrips	☐ Yes	☐ No	Location:	
External metal overstep handrail	☐ Yes	☐ No	Location:	
External metal double rail	☐ Yes	☐ No	Location:	
External hand grip	☐ Yes	☐ No	Location:	

Application form to be returned to:

F. M. Maintenance
Repairs Team,
Kelliebank Depot,
Kelliebank,
Alloa,
FK10 2NT
Telephone: 01259 452000

Date Received:_____
Checked by: _____
Date Processed:_____