#### **Waltham Forest Social Services Community Alarm**

**Application form** (PLEASE COMPLETE THE FORM IN CAPITAL LETTERS)

#### Part 1 – About you and where you live

Title	
Title	
First name	
Surname	
Date of Birth	
Ethnic origin	
Religion	
S	
Language	
Do you have a disability? Yes	No $\square$ – If <b>yes</b> , please tell us what it is
20 you nave a alsability. Tes	Troil in yes, pieuse ten us what it is
Your address	
Telephone number:	
We can only provide a Communi	ty Alarm if you have a landline number. We cannot use
mobile phone numbers.	ty manning you have a farmanne mannaem tree cannot use
·	
<b>Do you.</b> (please tick a box)	
Own where you live? $\square$	
Rent it from Waltham Forest Cou	ıncil? 🗆
Rent it from a landlord or housin	g association? $\square$ –
If you rent your home, please giv	ve us the <b>name and address</b> of who you rent from
, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
Do you have any medical condit	ions? Yes□ No□ – if <b>yes,</b> please give details
Do you have any meaner contain	ions. Tes I to I in yes, please give details
What is your doctor's name and	telephone number?
Name	Telephone number
INGITIE	тетернопе пишьег
Address	

### Part 2 – Are you eligible for a Community Alarm?

To be eligible for a Community Alarm you will need to be able to tick ONE or more of the following conditions
Tollowing conditions
Are you (please tick all those that apply to you)
Living alone
Left alone regularly by family members or other carers $\ \Box$
Housebound (can't get out by yourself)
Feel vulnerable at home even though you may be able to get out and about $\Box$
A carer of a disabled child or adult who needs the help of the control centre to call for
help in an emergency
Or do you need to be able to contact a doctor or someone else in an emergency $\ \Box$
Part 3 – To install the Community Alarm
To install the Community Alarm you will need a modern telephone socket and a spare 13-amp plug socket to plug the alarm into. Both these sockets must be on the same wall in the same room and be no more than <b>one metre</b> apart.
Do you have a telephone? Yes $\square$ No $\square$
Do you have a modern telephone socket? Yes□ No □
Is there a 13 amp socket within one metre of the telephone socket & on the same wall in
the same room? Yes $\square$ No $\square$
Please be careful when deciding where to put the alarm so that you don't have trailing wires that may trip you up
Part 4 – Your emergency contacts
Please give details of at least two contacts, living close to you, who can be keyholders
and be contacted in an emergency. Please note that control staff may call these people at anytime, day or night, to let the emergency services into your home.
Name
Address
Home telephone number Work telephone number
Relationship to you

Name						
Address						
Home telephone number	Work telephone number					
Relationship to you						
Next of kin / family / friends Name						
Address						
, ladi ess						
Home telephone number	Work telephone number					
Tiome telephone number	work telephone number					
Relationship to you						
Relationship to you						
If you do not have anyone to act as a keyh	older, a key safe could be attached to the					
outside of your property to hold a spare ke	•					
butside of your property to floid a spare ke	y •					
If you need a key safe fitted, please tick th	nis hov. $\square$					
ii you lieed a key sale litted, please tick ti						
Places note that in the event of an alarm	call you are responsible for making good any					
Please note that, in the event of an alarm call, you are responsible for making good any damages caused by the emergency services trying to gain access to your property.						
damages caused by the emergency service	s trying to gain access to your property.					
Part 5 – Comments / additional infor	mation					
i di Commento y daditional imol						
Please use this space to tell us any extra information you feel we should know.						

### Part 6 – Charges

Your name	Signature	Date			
Checked by	Date				
(Please print name)					
Office/Phone number					
Once completed you can return th	is form either				
. ,					
By post to Community Alarms, Wi	D Liaison,				
Waltham Forest Town	Hall,				
Forest Rd,					
E17 4JF					
Or send an electronic copy to telecare.referrals@walthamforest.gov.uk					
21 22 12 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1					



Waltham Forest Town Hall, Forest Road, Walthamstow, E17 4JF

Dear Sir/Madam,

#### Bank details - London Borough of Waltham Forest

Further to your request, please find the bank details below:

Bank: Barclays Bank PLC

**Barclays Corporate** 

Level 25

1 Churchill Place London E14 5HP

**Sort Code:** 20-00-00

Account Number: 03712060

Account Name: London Borough of Waltham Forest

Vat Reg Number: 248 2128 66

Yours sincerely

Debbie Drew

Pensions & Treasury Manager





Please fill in the whole form including official use box using a ball point pen and send it to:

London Borough of Waltham Forest Exchequer Services Waltham Forest Town Hall Room 201 Forest Road London, E17 4JF

	) OI ACC	ount Ho	iuei (5)								
Bank/B	uilding S	Society a	account	numbei							
	I		l			ı					
Branch	Sort Co	de		1		_					
						_					
	nd full p	ostal ad	ldress o	f your B	ank or	Buile					_
To: The	Manager						Banı	k/Bui	lding	Socie	ety
Address											
					Postco	ode					
					Postco	ode					
					Postco	ode					
Referer	ce Num	ber			Postco	ode					
Referen	ice Num	ber			Postco	ode					
Referen	ce Num	ber			Postco	ode					

## Instruction to your Bank or Building Society to pay by Direct Debit

Originator's Identification Number									
9	7	3	6	4	3				
Cu	FOR London Borough of Waltham Forest OFFICIAL USE ONLY  Customer Account Number (this is the seven digit number on your invoice)								
Instruction to your Bank or Building Society Please pay London Borough of Waltham Forest. Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with London Borough of Waltham Forest and, if so, details will be passed electronically to my Bank/Building Society.									
Signatu	re(s)								
Print Na	me								
Date									

Banks and Building Societies may not accept Direct Debit Instructions from some types of account

This guarantee should be detached and retained by the Payer.

# The Direct Debit Guarantee



• This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme.

The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.

• If the amounts to be paid or the payment dates change London Borough of Waltham Forest will notify you 10 working days in advance of your account being debited or as otherwise agreed.



• If an error is made by London Borough of Waltham Forest or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.



You can cancel a Direct Debit at any time by writing to your Bank or Building Society.
 Please also send a copy of your letter to us.

