

Lancaster and Morecambe Citizens Advice Bureaux

Registered Charity No: 1102948, Company Registration No: 4697860

Registered Charity No: 1103704, Company Registration No: 5093344

Referral Form

When completed, fax to Morecambe on 01524 400401 or Lancaster on 01524 846447.

Please ensure the form is signed by the client and both sides are fully completed.

Referring Agency:	Date:
Contact Name:	Contact Tel:
Address of Referring Agency:	

Client Details

Name:	Date of Birth:
Address:	NI Number:
Postcode:	Contact Tel:
Can we contact client by	Letter Y / N Telephone Y / N
Can we leave messages?	Telephone Y / N With Who?

Enquiry Details

Summary of issue:
Time limits / reason for urgency:

Please fully complete both sides

Client Profile

Does the client live with a partner? Yes No

Does the client have any dependants? Yes No

Age of dependants? _____

Is the client or their partner in receipt of the following benefits?

- Income Support Yes No
- Income Based Employment Support Allowance Yes No
- Income Based Jobseekers Allowance Yes No
- Guaranteed State Pension Credit Yes No

Is the client or their partner employed? Yes No

Net monthly household income (including any benefits or tax credits): £ _____

Net monthly housing costs. Please circle (mortgage / rent) £ _____

For mortgaged property: Approx value of Property £ _____

Approx value of Mortgage £ _____

Left to pay £ _____

Does the household have capital or savings of more than £8000? Yes

Additional Information (e.g. accessibility needs):

Client Consent

I give permission for this information to be passed to, and held by Lancaster or Morecambe Citizens Advice Bureaux, who will treat it in the strictest confidence.

<p>Client signature/s:</p>	<p>Date:</p>
-----------------------------------	---------------------

