

SOUTH HOLLAND DISTRICT COUNCIL LIFELINE APPLICATION FORM

Please complete this form and return to:

Lincolnshire Housing Partnership
Chantry House
3 Lincoln Lane
Boston
Lincs
PE21 8RU.

Lincolnshire Housing Partnership (LHP) manages this service on behalf of the Council. LHP will contact you to arrange installation of the Lifeline. If you have any questions about the service, please call LHP on 01205 318588.

CUSTOMER DETAILS
Name:
Address:
Town:
Post Code:
Date of Birth:
Ethnic Origin:
Gender: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Religion:
Preferred language:
Home No:
Mobile No:
Email Address:
Accommodation Type: <input type="checkbox"/> House <input type="checkbox"/> Bungalow <input type="checkbox"/> Flat <input type="checkbox"/> Other
Household Type: <input type="checkbox"/> Owner <input type="checkbox"/> private rented <input type="checkbox"/> council/social rented

Can you understand & communicate effectively? <input type="checkbox"/> YES <input type="checkbox"/> NO
Any Special Communication Needs:
Do you have an electric plug socket near to your telephone point? <input type="checkbox"/> YES <input type="checkbox"/> NO
Who should we contact to arrange installation? <input type="checkbox"/> Customer <input type="checkbox"/> Other If other, please provide details: Name: _____ Telephone no: _____ Relationship to you: _____

Use of Personal Information

This notice explains how information about you is used. This form is supplied jointly by South Holland District Council and Lincolnshire Housing Partnership, who will both have access to your personal information for the purposes of providing services to you. References to 'we' in this notice are references to both organisations unless stated otherwise.

The information we gather

We gather certain information about you for the purposes of providing services to you. We may also obtain information about you from third parties, such as the local authority.

Disclosures and exchange of information

We may disclose and exchange information with the local authority, emergency services, safeguarding teams and each other, as well as with law enforcement agencies and regulatory bodies for the above reasons.

Consent

I consent to the processing of information as described above, and as described further in the Privacy Statements of each organisation. I consent on my own behalf and duly authorised on behalf of any third party whose personal data I supply.

Signature: _____ Date: _____