|  |
| --- |
|  Service Information Form & Authorisation Form |

|  |
| --- |
| Service User Name Date of Birth  |
| Address;  |
| Post Code Telephone  |
|  |
| Start Date LL no: |

|  |
| --- |
| **INCOME BREAKDOWN PER WEEK** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Local Authority |  ILF  | Health  | Other | Total |
| **Yes**  |  |  |  |  |

**Services Required Yes / No / Details Cost**

|  |  |  |  |
| --- | --- | --- | --- |
| Finances Support  | **Appointee Service** | **Fees** | **PLEASE TICK which service you require** |
|  | Appointee set up fee | £50.00 | £50.00 |
|  | Appointee service client in care home no prepayment card. | £18.00 per week |  |
|  | Appointee fee client in care home having pre-payment card | £30 per week |  |
|  | Appointee fee in own home pp card included if required. | £30 per week |  |

**Appointee fees to be paid by invoice by SCC Fapr please contact fapr to set up payments.**

|  |
| --- |
| **Additional Comments** |
| **Return all Appointee referrals to debbie.machin@idksupport.co.uk** |

|  |
| --- |
| **Service User Signature : Date :**  |
| **IDK Signature : Date :** |

|  |
| --- |
| **Authorisation** |
| Approval form budget holder in L.A |
| Finance approval  |
| Director of Operations/contract manager |

Company Number 7787916

Registered offices - IDK Support 4 you Ltd