

CONFIDENTIAL

Referral Number		Date Received	
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**RECYCLING FIRST PROJECT
REQUEST FOR FURNITURE**

Contact: Tom Logan

Unit12A Macmerry Ind Est.

Macmerry

EH33 1RD

Phone: 01875 615797

Email: recyclingfirstel@gmail.com

Web: www.recyclingfirstel.org

Client Contact Personal Details		Referral Agents Information	
Name:		Org Name:	
Address:		Contact Name:	
Town:	Post Code:	Address:	
Tele/Mobile:		Town:	Post Code:
		Tel:	

FURTHER INFORMATION

TENANT	No	AGE	INCOME	Tick	SOCIAL FUND APPLICATION	Tick
Female			Income Support		Not Applied	
Male			Low Income		Waiting	
Single			Incapacity		Successful	
Children			Disability		Rejected	
HOUSING	Tick		JSA		DATE OF LAST APPLICATION	
ELC			Universal Credit			
Housing Assoc						
Private						

ITEMS REQUESTED – Quantities must be specified

BEDROOM	No	LIVING Rm / KITCHEN	No	STARTER PACKS	No
1. Double Bed		6. Suite		14a. Crockery *	
2. Single Bed		7. Settee		14b. Pots & Pans *	
3. Bedside Cabinet		8. Armchair		14c. Cleaning Items *	
4. Wardrobe		9. Living Room Unit		14d. Bedding Double *	
5. Chest Of Drawers		10. Coffee Table		14e. Bedding Single *	
		11. Dining Table		14f. Curtains *	
		12. Dining Chairs		14g. Towels *	
		13. Kitchen Table		14h. Food Pack *	

APPLIANCES WILL BE ALLOCATED IF AVAILABLE

TYPE	No	TYPE	No	TYPE	No
15. Electric Cooker		17. Fridge		19. Fridge Freezer	
16. Micro Wave		18. Freezer		20. Washing Machine	

REFERRING OFFICERS SUPPORTIVE COMMENTS

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***Exempt from Delivery Charge**

Note:- There is a £10 Delivery charge associated with this request. The money can either be paid at the Recycling First Warehouse at Macmerry Ind Est. Or can be paid direct to the Driver on Delivery of goods. A receipt will be issued with either method of payment.

Signature (Service User): **Date:**

Signature (Referring Officer): **Date:**

Charity No SCO45286