**LBN Accommodation Application Form**

**PROVIDER INFORMATION**

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| --- | --- |
| **Name of your Organisation** |  |
| **Organisation Address** |  |
| **Name of Key Contact** |  |
| **Position** |  |
| **Email** |  |
| **Phone Number** |  |
| **Property address:****Please include all property address to be added to the approved List** |  |
| **Please provide a short introduction to your organisation (150 words max.)** |  |
| **Are you currently providing supported living accommodation in Newham?**  | * Yes
* No
 |
| **Please indicate if you are the Landlord for building/s.**  | * Yes
* No
 |
| **Can you provide Landlord Details? Please provide landlord name, email address and contact number** |  |
| **Please indicate if Landlord is a Registered Provider** | * Yes
* No
 |
| **What arrangement is the tenure in place?**  | * Freehold
* Leasehold
* Rented
 |
| **What tenure do you give to your Service Users?** | * Licenced
* Tenancy
* Other please specify:
 |
| **Do you have in place LBN property licence** | * Yes
* No
 |
| **If No have you submitted licence application.**  | * Yes Date submitted:
* No
 |
| **Has property been visited by LBN Private Housing & Enforcement****Housing** | - Yes - No If Yes please provide Date of visit:Outcome of visit:  |
| **Please provide details of any remedial action plan required to meet minimum standards** |  |

On submission of Provider Information, we will decide if property meets the required accommodation standards and building/s will be added to the list.

Timeframe to validate information and add to approved list will be determined by demand and resources but we will aim to confirm next steps within 30 days of submission of provider information form.

Admission to the approved accommodation list does not guarantee activity; this will still need to be procured via the Supporting Vulnerable Adults Dynamic Purchasing Vehicle (DPV).

Applications which are not successful will be able to resubmit application for validation and approval to be added to approved list.

Please complete and return form to Siaccommodation@newham.gov.uk