

Client Account/Appointee Referral Form

Please ensure that all sections of the form are completed. Incorrect or missing information may delay the application.

If there is a current appointee prior to our application, they will need to relinquish their role with the DWP and advise that Serco, working in partnership with LCC, will be making an application.

Please provide a capacity assessment to accompany our application to the DWP (Adults only) and a Best Interests Assessment Checklist, as per policy guidance. Full Name: (including any previous/middle names) AIS/ICS Number: DOB: Current Address: Postcode: Type of Accommodation: (i.e. Care Home, Council House, Privately Rented, Owned) If Care Home please advise of date of admission **N.B.** If owned property, refer for Deputyship National Insurance Number: (this can be found on any correspondence from the DWP) Details of any bank accounts: (Name of bank, account name, number and sort code, including current balance)



Details of any debts:	
(Please provide copies of any	
correspondence)	
Details of current benefits received:) (
(Type of benefit, amounts being	
received, frequency)	J
Any private pensions:	
(Please provide account/reference numbers, correspondence address and	
amount)	
Adults Only)
Details of next of kin:	
N.B. all options with family acting as Appointee must be explored first	
	Tel:
	Relationship:
	. tolestioning:
Is there a Will:	
(If so, please provide a copy or advise of	
the current location) Adults only	
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Name of paragraph making the referral and	
Name of person making the referral and role in relation to Client:	



Please explain why the referral for appointeeship is being made:

Is there any Safeguarding involvement: If yes, please give contact details of manager/responsible worker

Is there a current appointee:

If there is a current appointee prior to our application, they will need to relinquish their role with the DWP and advise that Serco, working in partnership with LCC, will be making an application

Yes No

If yes, please provide details:

Please send completed forms to:

Serco Local and Regional Government Division Court of Protection and Appointeeship Team Thomas Parker House Floor 2 13/14 Silver Street Lincoln LN2 1DY

or email to:

client.accounts@lincolnshire.gov.uk

Telephone: 01522 555555