



Mobility scooters and motorised wheelchair

Customer self assessment form

As space to store and charge a mobility scooter is limited in some of our housing schemes it may be necessary to allocate space on a needs basis. We would be grateful if you would provide the following information to enable us to make an informed decision.

Your name Date of birth

Address

.....

.....Post Code

Model of proposed scooter (where known)

Do you have a medical condition or disability which restricts your mobility?

Please describe

Do you use any of the following to walk or get around?

one walking stick two walking sticks walking frame wheeled walker

manual wheelchair indoors outdoors both

powered wheelchair indoors outdoors both

Are you able to store the scooter / wheelchair inside your own dwelling?

yes

no

Are you able to store the scooter / wheelchair on your own property i.e. A garden or shed?

yes no

Are you able to get from the storage area to your own dwelling?

yes no

Will you be able to get your scooter / wheelchair into your property without any alterations i.e. ramps, widening paths...etc?

yes no

Please note that Teign Housing is not able to fund any alterations for scooters.

Are you able to manoeuvre the scooter within the storage area?

yes no

Are you able to get in / out of a car?

yes no

Are you able to access local shops and services?

Independently with family / friends by car by taxi by bus

Please read the following statement:

I am aware that permission to store a scooter / wheelchair in a Teign Housing property will be made on a needs basis. I give my consent for information to be shared with relevant medical and social care providers if further information is needed.

Signed..... Date.....

Tenant

Signed..... Date.....

Teign Housing