



HOME SERVICES DIRECTORY

Application Form



To become a member of the Home Services Directory please complete this form and return to Andy Woad at the address at the end of the form.

Full Name: _____ Trading Name: _____

Telephone: _____ Fax: _____ Email: _____

Which applies to your business?

Sole Trader Partnership Limited Company

If a sole trader please provide your address:

If a partnership please provide the full name & address of all partners:

If a limited company please give the full name & registered address of the company, company number AND full name and address of directors:

Company address: _____

Company registration number: _____

Directors full name & address:

What type of paid tasks / trade are you interested in providing?
(Please tick - you can tick a maximum of 3 boxes)

Handy person	<input type="checkbox"/>	Plumber	<input type="checkbox"/>	Painter/ Decorator	<input type="checkbox"/>
Electrician	<input type="checkbox"/>	Driveways	<input type="checkbox"/>	Gardener	<input type="checkbox"/>
Builder	<input type="checkbox"/>	Drainage	<input type="checkbox"/>	Glazing	<input type="checkbox"/>
Joiner	<input type="checkbox"/>	Carpet fitter	<input type="checkbox"/>	Mobile hairdresser	<input type="checkbox"/>
Security installer	<input type="checkbox"/>	Roofer	<input type="checkbox"/>		
Other _____					

Please give details of particular areas or work/specialisms covered within the above categories (information here will be included in the directory)

Please list any Trade Associations you are a member of:

How long have you been in this specific business?

Please list any relevant qualifications you have gained _____

Do you run any other business? Yes No
(Or have you in the last 5 years?)

If yes please give name, full details inc address/type of work: _____

Please nominate the person you would like to be contacted if there was a customer complaint: _____

The following information will be printed in the Home Services Directory that consumers will receive:

Do you have a call-out/diagnostic charge? YES / NO
If yes, please give details _____

Can you be called out to carry out emergency work? YES / NO
If yes, please give details _____

References:

Please supply details of three referees, two should be people for whom you have undertaken work in the last 12 months. We may take references from, or visit, all or some of people listed.

You should have agreement from your referees before you give us their details.

1. Name: _____

Address: _____

In what capacity do you know the referee? _____

2. Name: _____

Address: _____

In what capacity do you know the referee? _____

3. Name: _____

Address: _____

In what capacity do you know the referee? _____

Do you employ any staff who will visit customers in their homes to carry out work?

YES / NO If YES please complete the employee information on the next page
If NO please go straight to the declaration section on the next page

Employee Information

You must complete this section if you have employees who will carry out work for customers contacting you through the Home Services Directory.

Any employee who will visit a customer in the home to carry out work must provide the police check. Please ensure you enclose their completed police form (DPSA1A) and give their names and addresses below.

Name: _____ Name: _____

Address: _____ Address: _____

Name: _____ Name: _____

Address: _____ Address: _____

Use an extra sheet if necessary and attach to this form.

DECLARATION

**I wish to be considered for membership of the Home Services Directory
I have read, understood and agree to the terms and conditions of membership**

Please ensure the following are enclosed: (please tick)

Completed Police check and that of any employees

Completed CCJ check

Proof of Public Liability Insurance

Blank copies of my business documentation

Cheque for £50 + 17.5% VAT (£58.75)

Signed _____ Date: _____

Print Name _____ Position _____

Please return to: Andy Woad
North Lincolnshire Council
Trading Standards Division
PO Box 42
Church Square House
Scunthorpe
DN15 6XQ