**mmodation**

Name:

Address:

Migrant Help Reference Number:

Port or NASS Reference:

I give consent for Care4Calais to share this information: YES / NO

**Items to expect in the accommodation**

The following items are required to be provided in the accommodation.

If anything from these lists is missing or broken, please complete this form.

|  |  |  |  |
| --- | --- | --- | --- |
| **Room** | **Items** | **YES √** | **NO X** |
| **1. Bathroom** | a. Bath or shower and shower curtain |  |  |
| b. Wash basin |  |  |
| c. Toilet |  |  |
| **2. Kitchen** | a. Cooker or oven and hob |  |  |
| b. Microwave |  |  |
| c. Cookware and utensils |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | d. Cutlery and crockery |  |  |
| e. Cupboards |  |  |
| f. Food preparation area |  |  |
| h. Sink |  |  |
| i. Refrigerator and freezer |  |  |
| j. Broom or other cleaning equipment |  |  |
| **3. Bedrooms** | a. Bed (single or double) |  |  |
| b. 1 wardrobe per room or 1 per single person |  |  |
| c. 1 chest of drawers per room or 1 per single person |  |  |
| **4. Dining and living room** | a. Table |  |  |
| b. 1 dining chair per person |  |  |
| c. 1 armchair or sofa seat per person |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **5. Facilities** | a. | Access to fresh drinking water |  |  |
| b. | Laundry facilities |  |  |
| c. | Clothes dryer or clothes line |  |  |
| d. | Ironing board and clothes iron |  |  |
| e. | Child care equipment (cots and high chairs and sterilisation equipment for children under the age of 1 year) |  |  |
| f. | curtains or blinds |  |  |
| g. | Smoke and carbon monoxide detectors |  |  |
| **6. New linen** | a. | Bath towels |  |  |
| b. | Face flannels |  |  |
| c. Sheets | |  |  |
|  | d. Blankets and duvets | |  |  |
| e. Hand towels | |  |  |
| f. Tea towels | |  |  |
| g. Pillows and pillow cases | |  |  |
| h. Duvet covers | |  |  |

Some common items which providers do not need to supply:

* **telephone • broadband/wifi connection**
* **television/TV • vacuum cleaner**

7. Do you have any other concerns about the property? Please inform a care4calais volunteer and we will submit the evidence below.

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Name and signature of person submitting this information Date