

Welfare Assessment

For Guidance of Authorising Officer

1	Location of UE (plan attached)		
	Date information received	Date of occupation	Date of site visit
	Names of visiting officers		
	Number of people on the site		
	Complaints received		

2	Vehicle	Make	Model	Colour	VRN & other distinguishing features
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				

3	Caravan	Make	Model	Colour	Other Distinguishing Features
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				

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4 Information about the UE

How long do the occupants intend to remain in this location?	
What is the main reason for camping in this place?	

5

Impact on adjoining or nearby properties	
Damage to Council property or prejudice to its employees	
Prejudice to the use of land by legitimate tenants or occupant	
Too large for its location or causing unacceptable impact on the environment	
Any issues relating to trade waste or similar?	
Any issues noted relating to animals / animal health?	
Any other information	
Evidence to support:	

6 Encampment Conditions: Are the following facilities available?

	Yes	No
Refuse Disposal		
Toilet facilities		
Shelter		
Water		

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7 Welfare

Service	Details (include name of individual, type of service & provider, eg 'John Smith, emergency dental treatment, XY clinic')	Offer accepted? Yes / No	If 'no', is the view of the assessor that contact is advisable? If 'yes', note reason and any further action here.
Health Services			
Social Care			
Housing			
Education			
Other service			

8 Recommended Decision (having taken the above into consideration)

Signed.....

Date.....