

**From housing options team to social services**

**Referral to social services under section 213A with applicant's consent (reason to believe applicant with children may be ineligible or intentionally homeless)**

Duty Assessment Team

Children's Services

[Address of social services]

[Date]

By [first class post / email to: [insert email address]]

Dear

**Referral under section 213A of the Housing Act 1996**

[Name of applicant] of [Address of applicant]

Date of Birth: [DOB]

The above person has asked us to refer details of their case to you. The essential details and our reasons for making this referral are set out below.

**Reason for this referral**

[Name of applicant] asked us make this referral, after we invited them to consent to a referral. This was because the conditions in section 213A of the 1996 Act were satisfied. Specifically:

- A child lives with the applicant (or might reasonably be expected to reside with them)
- We have reason to believe they [may be ineligible for assistance (because of immigration or nationality status) / may have become homeless intentionally / may have become threatened with homelessness intentionally].

We have informed them that you will now decide if you must assess their circumstances and provide help or accommodation (for example under section 20 of the Children Act 1989).

**Summary of the application for assistance on grounds of homelessness and our assessment thus far**

[Name of applicant] applied to us on [date] for housing, and for help with obtaining accommodation.

*[Insert the following section if a section 184 decision has not yet been notified]*

We have yet to assess their circumstances under section 184 of the 1996 Act. However we have reason to believe the applicant [may be ineligible for assistance / may be intentionally homeless / may have become threatened with homelessness intentionally] because:

- [insert reasons]

*[Insert the following section if a section 184 decision has been notified]*



I enclose a copy of the decision we made on their homelessness application on [date], which sets out the essential details of the case, and why they do not qualify for the main housing duty.

**Household members**

The following persons form part of the applicant's household:

[Name]	[Date of birth]	[Relationship to applicant]
[Name]	[Date of birth]	[Relationship to applicant]

Please do not hesitate to contact me if have any questions in relation to this referral.

Yours *sincerely / faithfully*

[Insert name]

**Housing Options Officer**

Enc: copy of section 184 decision notification letter

