

**REQUEST FOR INSPECTION FOR IMMIGRATION PURPOSES.**

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| --- | --- | --- | --- |
| APPLICANTS NAME **(Usually the sponsor)** |  | | |
| **FULL NAMES, AGE AND SEX OF PERSON(S) ENTERING THE COUNTRY** | **NAME** | **DATE OF BIRTH** | **SEX** |
|  |  |  |
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|  |  |  |
| --- | --- | --- |
| ADDRESS OF PROPERTY TO BE ASSESSED |  | |
| **CONTACT NAME AND TELEPHONE NUMBER FOR APPOINTMENT** | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| OWNER OCCUPIED | | TENANTED | |
| FREEHOLDER | LEASEHOLDER | PRIVATE | COUNCIL |
|  |  |  |  |

|  |  |
| --- | --- |
| OWNER/LANDLORDS NAME AND ADDRESS |  |
|  |  |
|  |  |

# List the full names of all persons resident in the property

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | DATE OF BIRTH | MALE OR FEMALE | PART(S) OCCUPIED |
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|  |  |  |  |

There is a fee of £73 for this service, and payment must be enclosed with this form. Cheques should be made payable to Lancaster City Council. Cash must not be enclosed.

## Please return the form to: Private Sector Housing

**Morecambe Town Hall**

**Morecambe**

**LA 4 5AF**