

# DAMP, MOULD AND CONDENSATION REPORTING FORM

If you are concerned about damp or mould in your home we want to help.

Your information and photos help us get the right people and materials to you to address the problem as soon as possible.

Name:	Address:
	Postcode:
Mobile/phone:	Email:

<p>WHICH ROOM IS THE DAMP OR MOULD IN? Please list, if more than one room.</p>	
<p>PLEASE ESTIMATE THE SIZE OF THE DAMP OR MOULD COVER. A rough guess is fine.</p>	
<p>IS THE PROBLEM AFFECTING WALLS, CEILINGS OR OTHER AREAS? Please specify.</p>	

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<p>HOW LONG HAVE YOU HAD THE PROBLEM? Less than a week, a month, 3 months etc.</p>	
<p>HOW MANY PEOPLE LIVE IN THE PROPERTY?</p>	
<p>IS ANYONE IN THE HOME CONSIDERED TO BE VULNERABLE? (Child(ren) under the age of 5, an older adult (75+) or anyone with a respiratory-related illness)</p>	

ALL TENANTS SHOULD SIGN THIS FORM BEFORE SUBMITTING:

LEAD TENANT	Name:	Signature:	Date:
JOINT TENANT	Name:	Signature:	Date:

**PLEASE SEND THIS COMPLETED FORM, ALONG WITH ANY PHOTOS YOU CAN TAKE OF THE PROBLEM TO:**

HomeFix, Saxon Weald House, 38-42 Worthing Road, Horsham, RH12 1DT  
or email [homefix@saxonweald.com](mailto:homefix@saxonweald.com).

