

AKERMAN MEDICAL PRACTICE

Housing Letter Request Form

Please be aware housing department usually do not need a letter for re-housing on medical ground. If the housing department has asked for medical evidence please ask to make this request in writing directly to the GP at the following address:

Akerman Medical Practice, 60 Patmos Road, London, SW9 6AF

If they are unable to this then please complete the form below there is a fee of £60 for all such requests.

Your name:				
DOB:		/		
Other family me Name		t this address:	Date of Birth	
Please give reas directly.	son why housir	ng department i	is unable to request a medical repo	ort
Name of Housir	ng Officer deali	ng with your ca	ase:	
Telephone num	ber of Housing	ı Officer:		



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Housing Letter Request Form

Borough of Housing Department:
What are your current medical conditions?
Please describe current housing problem?
Please describe briefly how your current housing is affecting your health.

Submit this form at the reception desk with £60 fee. We will endeavour to get your letter reading in 7 working days.

Akerman Medical Practice