



NANAIMO WOMEN HELPING WOMEN

MOVE SUPPORT REQUEST FORM

PLEASE PRINT OR TYPE CLEARLY

To be completed by the referring agency in conjunction with the client. Please note that Nanaimo Women Helping Women may be able to provide up to \$500 in moving support within the Regional District of Nanaimo. Please fill out this form and email to nanaimowomenhelpingwomen@gmail.com

Referring Organization

Date of Referral ____ / ____ / ____

Name of Organization	Staff Contact Phone Number
FULL NAME of Staff Contact	Staff Contact Email Address

Which staff from the referring agency will attend this move?

Full Name: _____ Position: _____

Client Information

FIRST Name of Client	LAST Name of Client
Contact Number	Email Address

Can this phone number receive SMS messages?

YES / NO

Moving Details

Intended Date of Move ____ / ____ / ____

MOVING FROM:

Unit No.	Street No.	Street Name	City
Province BC	Postal Code		

MOVING TO:

Unit No.	Street No.	Street Name	City
Province BC	Postal Code		



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Does the MOVING FROM address require unique access? (i.e. Entry buzzer, gated access, etc.) YES / NO

If yes, please explain _____

Does the MOVING TO address require unique access? (i.e. Entry buzzer, gated access, etc.) YES / NO

If yes, please explain _____

Does either the MOVING FROM or MOVING TO address require the mover to navigate stairs? YES / NO

If yes, please clarify how many flights _____

Are there any animals on site that will be included in the moving process? YES / NO

If yes, please clarify _____

Please note: It is the client's responsibility to ensure animals are under control at all times during the move.

Are there any safety concerns? YES / NO

If yes, please explain _____

Do you need an RCMP escort? YES / NO

If yes, please explain _____

Do you have any personal help on the day of the move to help load and unload items? YES / NO

If yes, please explain _____

ITEMS TO BE MOVED:

Please list all items to be moved and include pictures of all rooms to be moved:

LARGE ITEMS AND FURNITURE

BOXES AND SMALL ITEMS

Referring Organization Staff Signature

Client Signature
