OFFICE USE ONL	Y:	
Date received:		
Points award:		

Category	Points	Award	Award made by:
Ability to meet own housing needs	20		
Loss of tied accommodation	10		
Loss of accommodation within 1 year	50		
Overcrowding	10		
Sharing facilities	5		
Health A	10		
Health B	5		
Support	10		
Harassment, abuse or violence	10		
Transfer applicants	100		
Transfer applicants - downsizing	20		
Waiting time	10 per year		
TOTAL			2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Notes (including any contact with applicant and offers of housing made):

Date	Notes	Initials

PART FOUR - DECLARATION
Are you related to any member of the Association's staff or Board?
☐ Yes ☐ No
If yes, please state the name of person and your relationship to them.
"I/we declare that all the information I/we have given on this form is true and we will tell Witham Housing Association of any changes that may affect the application.  I/we also understand that if I/we have provided false or misleading information or fail to disclose any information relevant to this application, that I/we may be disqualified from being considered for housing.
I/we also understand that if I/we accept an offer of housing and it is later discovered that false or misleading information was given or relevant information was not disclosed by me/us that Witham Housing Association may then take action against me/us to end my/our tenancy. "
Please sign here to show that you understand the statement above and that the information you have given on this application is accurate.
1 <sup>st</sup> Applicant's Signature:
2 <sup>nd</sup> Applicant's Signature:
Dated:
What to do now
Send this form together with any supporting evidence e.g. doctors letter to the address below. If you wish to tell us anything that you have not mentioned already on this form, please enclose a

Send this form together with any supporting evidence e.g. doctors letter to the address below. If you wish to tell us anything that you have not mentioned already on this form, please enclose a covering letter or statement. Your application will be assessed within one month and we will write to you telling you what the outcome is. If we cannot offer you housing within one year we will contact you to check whether you want to remain on our waiting list.

HOW	would you describe your ethnic origin?		
	White British		Asian/British Pakistani
	White Irish		Asian/British Bangladeshi
	White Other		Asian/British Other
	Mixed White & Black Caribbean		Black British Caribbean
	Mixed White & Black African		Black British African
	Mixed White & Asian		Black British Other
	Mixed Other		Chinese
	Asian/British Indian		Other Ethnic Group
b. Wr	nere Do You Want To Live?		
	Noel Pelly House, Collingwood Road,	Witham	
	Podsbrook House, Guithavon Street, V	Vitham	
	Either		
If you	FOUR – LOCAL CONNECTIONS  currently live away from the area and waterils.	ant to m	nove to be closer to family or friends tell us
If you	currently live away from the area and w details.	ant to m	nove to be closer to family or friends tell us
If you their o	currently live away from the area and w details.	ant to m	nove to be closer to family or friends tell us
If you their o	currently live away from the area and waterails.  e:  ess:  hone		ir connection to
If you their of Name Address Telep	currently live away from the area and waterails.  e:  ess:  hone er:	The	ir connection to
If you their of Name Addre	currently live away from the area and waterails.  c: chone cer:	The	ir connection to
If you their of Name Addre Telep numb	currently live away from the area and waterails.  c: c: chone cer: chone chone chone chone chone	The	ir connection to

e. If you own your home						
What is the estimated value of your home?		£				
Do you have a mortgage?			Yes			No
Do you have any arrears?			Yes			No
If Yes, how much do you owe your mortgage compar	ny:	£		-		
If yes, has Court action been taken against you?			Yes			No
(please include evidence of pending Court Action or e	existing	g Court	Order)			
How much is still outstanding on your mortgage?		£		<del></del>		
f. If you rent your home						
Please provide the details of your current landlord:						
Name:	Telep	hone:	3			
Address:						
How much is your rent?	£			weekl	y / mor	nthly
How much is your rent?  Are there any rent arrears?	£	Yes		weekl	y / mor No	nthly
-	£			weekl		nthly
Are there any rent arrears?	£  £	Yes		weekl	No	nthly
Are there any rent arrears?  If yes, has Court action been taken against you?	£	Yes		weekl	No	nthly
Are there any rent arrears?  If yes, has Court action been taken against you?  How much rent do you owe?	£	Yes Yes		weekl	No No	nthly
Are there any rent arrears?  If yes, has Court action been taken against you?  How much rent do you owe?  Have you been given Notice to end your tenancy?	£ of trea	Yes Yes Yes ating all any pe	applica	nts for in the	No No No	ng unity
Are there any rent arrears?  If yes, has Court action been taken against you?  How much rent do you owe?  Have you been given Notice to end your tenancy?  PART THREE – OTHER INFORMATION  a. Ethnic Monitoring  Witham Housing Association is committed to a policy equally and considers applications for accommodation based solely on their housing and support needs. We	£ of trea	Yes Yes  Yes  ating all any ped applic	applica	nts for in the	No No No	ng unity ensure
Are there any rent arrears?  If yes, has Court action been taken against you?  How much rent do you owe?  Have you been given Notice to end your tenancy?  PART THREE – OTHER INFORMATION  a. Ethnic Monitoring  Witham Housing Association is committed to a policy equally and considers applications for accommodatio based solely on their housing and support needs. We we are treating everyone fairly.	£ of trea	Yes Yes  Yes  ating all any ped applic	applica	nts for in the	No No No housir commi	ng unity ensure
Are there any rent arrears?  If yes, has Court action been taken against you?  How much rent do you owe?  Have you been given Notice to end your tenancy?  PART THREE – OTHER INFORMATION  a. Ethnic Monitoring  Witham Housing Association is committed to a policy equally and considers applications for accommodatio based solely on their housing and support needs. We we are treating everyone fairly.	£ of trea	Yes Yes  Yes  ating all any ped applic	applica	nts for in the	No No No housir commi	ng unity ensure

Do you have r	regular carers to	help you with	n this?		Yes	☐ No
voluntary grou	<del>-</del>	e write the nar		cial Services, the organisation(s)		•
Organisation:						<del></del>
Contact Name	<b>.</b>			Telephone:	-	
Can we contain	ct this organisat	ion to discuss	relevant	information abou	ut your hou	sing application?
☐ Yes	☐ No	)				
Part Two - A	ABOUT YOUR	CURRENT Ho	ME			
a. Which of th	ne following be	st describes	your cur	rent housing si	ituation?	
Living w	vith Friends/Rel	atives		Owner Occupi	er	
Lodger				Tenant		
b. What type	of home do yo	u currently liv	ve in?			
☐ House	☐ Bu	ingalow		Mobile Home		Hostel/B&B
☐ Flat	☐ Ma	aisonette		Bedsit		
If you live in a	flat or bed-sit, w	vhich floor is it	on?			
How many roo	ms are there in	your present	home?			
Living and/or d	lining rooms:	<del></del>	<u></u>	Kitchens	s:	
Bed sitting roo	ms:	<i>i</i>		Bedroor	ms:	
Bath or showe	r rooms:			WCs:		
c. Please tell us whether you share the following facilities with another household:						
	Bedroom	Bath or s	hower ro	om Ki	tchen	Lounge
Sole use Shared						
Please give de	ving with friend tails of any relate not include you	tives or friends	s that you	currently live w	ith and thei	r relationship to

Yes No Please state the nature o	f the o	ffence and	when it or	curred:
Please provide confirmation of the above from a Solicitor, F source.	robati	on Officer,	or other a	opropria
J. Your Income				
What is your total income?	£		pe	r month
low much do you have in savings (to the nearest £100)?	£			
Oo you receive a state pension (including pension credits)?		Yes		No
o you receive a private pension?		Yes		No
. Your Support & Medical Needs  lease describe any medical needs or disabilities you have hich:  significantly affect your daily life are being made worse by your current housing or	ave. Y	'ou should		r month
. Your Support & Medical Needs lease describe any medical needs or disabilities you he hich: significantly affect your daily life	ave. Y			
. Your Support & Medical Needs  lease describe any medical needs or disabilities you her highlighter than the high	ave. Y			
. Your Support & Medical Needs  lease describe any medical needs or disabilities you have hich:  significantly affect your daily life are being made worse by your current housing or would be improved by a move to more suitable hous	ave. Y			
Rease describe any medical needs or disabilities you havhich: significantly affect your daily life are being made worse by your current housing or would be improved by a move to more suitable hous	ave. Y	ou should		ude thir
Please describe any medical needs or disabilities you havhich: significantly affect your daily life are being made worse by your current housing or would be improved by a move to more suitable hous to you or your partner need to use a wheelchair indoors? To you or your partner need to use a wheelchair outside?	ave. Y	ou should		ude thir
Please describe any medical needs or disabilities you havhich: significantly affect your daily life are being made worse by your current housing or would be improved by a move to more suitable hous to you or your partner need to use a wheelchair indoors? To you or your partner need to use a wheelchair outside? To you or your partner need to use walking Sticks/frame?	ave. Y	ou should Yes Yes		No
are being made worse by your current housing or	ave. Y	Yes Yes Yes		No No No

c. If you have lived in your current home for less than 3 years, please tell us your previous address				
Address:				
Moved in: Moved out:				
Were you: (Please tick ✓) ☐ A private tenant/lodger ☐ An owner occupier				
Living with friends In accommodation Or relatives In accommodation Or relatives Or relatives Or relatives				
A council tenant Other				
Why did you leave this address?				
Important - If you give false or misleading information or fail to disclose relevant information requested in questions D, E & F you will be disqualified from being considered for housing.				
If you accept an offer of housing and it is subsequently discovered that you have given false or misleading information or failed to disclose relevant information Witham Housing Association may take enforcement action to end the tenancy.				
d. Do you or your partner have rent or mortgage arrears from any previous address(es)?				
☐ Yes ☐ No				
If yes, do you have a repayment agreement that has been maintained for at least one year?				
☐ Yes ☐ No				
If yes, please provide a reference from your former landlord or mortgage provider confirming the agreement and that you have kept to it.				
a Have you or anyone applying for bouging with you had any enforcement action taken				
e. Have you, or anyone applying for housing with you, had any enforcement action taken against you for anti social behaviour within the last two years?				
☐ Yes ☐ No				
If yes, when was this action taken and what form did it take? (e.g. ASB order, injunction, possession)				
Please provide confirmation of the above from a Solicitor or other appropriate source e.g. your previous landlord.				



## **APPLICATION FOR HOUSING**

You should complete this form if you wish to apply to Witham Housing Association for affordable sheltered housing. You can find details of who can apply and how applications are dealt with in the accompanying leaflet "Applying for Housing".

Please use block capitals and blue or black ink. If you would like any help with filling out this form, please ask and we will be happy to help.

## **PART ONE - INFORMATION ABOUT YOU**

a. Your Personal Details	
First name:	Surname:
Title: Mr / Mrs / Miss / Ms / Dr / Prof	Other:
Address:	
Date of Birth:	National Insurance No:
Home Telephone:	Mobile:
E-mail address:	@
b. Your Partner's Personal Details	
First name:	Surname:
Title: Mr / Mrs / Miss / Ms / Dr / Prof	Other:
Address:	
	<del>,</del>
Date of Birth:	National Insurance No:
Home Telephone:	Mobile:
E-mail address:	
When did you move into this address?	