

Housing Register Change of Circumstances Form

Please fill in section 1 and every other section where you have a change in your circumstances.

1. Main applicant's details (You must complete this section)

Your housing application reference number:
Title: Mr/Mrs/Ms/Miss
Forename:
Surname:
Current address (where you are living now):
Postcode:
Previous address (please fill in this box if you have moved and not told us):
Postcode:
Home telephone number:
Work telephone number:
Mobile:
Email address:
Date of birth:

2. Only complete this section if you are reporting a change of address

If you have a new landlord please tell us their name and address:

Postcode:

Telephone number:

Please tell us what sort of home you are living in now (please tick)

<input type="checkbox"/> House	<input type="checkbox"/> Caravan / mobile home
<input type="checkbox"/> Flat	<input type="checkbox"/> Bungalow
<input type="checkbox"/> Studio	<input type="checkbox"/> Room(s) in shared accommodation
<input type="checkbox"/> Maisonette*	<input type="checkbox"/> Other (Please specify) _____

* a **maisonette** is a self-contained flat, usually on two floors, which has its own front door from the outside.

Please tell us about the rooms in the home where you live now.

	Please tell us how many of these rooms you have	Do you share these rooms with anyone?	
Bedrooms		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Living/Dining Rooms		<input type="checkbox"/> Yes	<input type="checkbox"/> No

How would you describe your new housing situation? (please tick one box)

<input type="checkbox"/> An owner occupier	<input type="checkbox"/> Renting from a private landlord	<input type="checkbox"/> In prison
<input type="checkbox"/> Staying with friends	<input type="checkbox"/> In Bed & Breakfast accommodation	<input type="checkbox"/> In an institution
<input type="checkbox"/> Staying with relatives	<input type="checkbox"/> In a hostel	<input type="checkbox"/> In hospital
<input type="checkbox"/> In armed forces accommodation	<input type="checkbox"/> In tied accommodation (provided with your job)	<input type="checkbox"/> Of no fixed address
<input type="checkbox"/> Other (please state)		
<input type="checkbox"/> In accommodation arranged through another local authority If yes, please tell us the kind of accommodation and the local authority		

3. Only complete this section if you want to add one or more persons to your housing application

Surname	First name	Gender	Date of birth	Relationship to you the applicant (husband/wife brother/son etc)	Ethnicity

4. Only complete this section if you want to remove one or more persons from your application:

Surname	First name	Date of birth

5. Only complete this section if you have any other change in circumstance not mentioned above.

Please tell us about any other change in circumstance for you or a member of your household e.g. started a new job, changed a job, a change in health/medical condition.

Declaration:

I/We confirm that the information given in this form is correct and to the best of my/our knowledge.

I/We understand that any information that is untrue or withheld is a criminal offence under the Housing Act 1996 and may result in my/our prosecution.

I/We understand that this offence may result in my/our application being removed from the housing register and/or the loss of any tenancy that may have been given to me/us by the council or a housing association.

I/We undertake to notify the council of any future change in my/our circumstances as declared on this form.

I/We authorise Haringey Council to approach other agencies, such as employers, benefit agency, credit referencing agencies as well as other council departments to confirm any details.

Main Applicant	Joint Applicant
Signed	Signed
Date	Date

Please hand this form in to one of our two Customer Service Centres at:

Wood Green: Ground Floor,
48 Station Road, N22 7TY

South Tottenham: Apex House,
820 Seven Sisters Road, N15 5PQ

or you can email the scanned form to the following email address:

housing.registration@haringey.gov.uk

or post the form to:

Housing Assessment Team
1st Floor, Apex House
820 Seven Sisters Road
London N15 5PQ