

Name: _____

Documents you will need to supply for your Housing Application Form

Please tick to tell us what documents you have included with your application

If you do not provide all the documents where appropriate, your application may be returned unregistered

- 2 passport photos for adults listed on the application
- Proof of National Insurance number for all adults listed
- 2 forms of ID for all adults listed on application (**one form must be photo ID, passport, driving licence, birth certificate or senior citizen bus pass**)
- Proof of residency (documents in your name dated currently i.e utility bill/ bank statement)
- Proof of local connection, documents in your name dated 6 months prior or 3 out of the past 5 years document for each year
- Proof of employment- confirmation letter from employer (dated and showing employer name and address) or 4 most recent payslips (if not living in the Borough)
- Support needs- proof of family connection in the Borough (bank statements, utility bills with name and address for the last 3 out 5 years)
- Proof of child benefit- letter dated within the last 6 months with child's name or bank statement showing child benefit transaction dated currently
- Full birth certificate for dependant children

Name: _____

- Current documents for non dependant children- bank statement or other official document showing name and address
- If you have owned or sold a property within the last 5 years, a copy of completion statement showing the proceeds from the sale
- If you still own a property please provide current estate agent's valuation and evidence that the property is being actively marketed for sale
- If you were previously a council or housing association tenant we will need proof you are no longer on the tenancy and the rent account was clear
- If you were born outside an EU country we would need to see original home office papers and passport

NOTE- You may be asked to provide additional documentation depending on your individual circumstance.

For Office Use Only

Regn. No.	
Category	
Regn. Date	
Points	



**BRENTWOOD
BOROUGH COUNCIL**

Housing Application Form

Please read Brentwood Council's Allocation Policy booklet in conjunction with this form. If you need help to complete the form, ask at Reception or ring (01277) 312552/312567 (Housing Needs). Make sure you have answered all questions fully and have provided the necessary proof. Failure to do so may delay the assessment of your application and the form may be returned to you for completion.

We can provide this document in other formats, such as large print, Braille, audio or a translation. For more information, please call 01277 312629.

1. Those requiring accommodation

Applicant's full name Title Mr Mrs Miss Ms (please tick)

Surname First name/s

Date of birth

Current address
Postcode

Contact telephone numbers

Home Mobile

Work National Insurance number

Partners full name Title Mr Mrs Miss Ms (please tick)

Surname First name/s

Date of birth

Current address
Postcode

Contact telephone numbers

Home Mobile

Work National Insurance number

2. Eligibility for assistance under The Housing Act

The Council is required to determine whether you are a 'qualifying person' as only 'qualifying persons' under the Housing Act 1996 can be included on the Housing Register.

Please ask for assistance for information on member countries of the Commonwealth or European Union if you are unsure of your citizenship. (Please tick applicable boxes below)

	1. Applicant	2. Partner
A British Citizen	<input type="checkbox"/>	<input type="checkbox"/>
A Commonwealth Citizen with the right of abode in the UK	<input type="checkbox"/>	<input type="checkbox"/>
A citizen of a member country in the EU?	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

3. All those requiring accommodation

Please provide details of all person(s) you wish to live with you

Surname	Forename(s)	Present Address(es)	Sex M/F	D.O.B	Relationship to applicant

If any of the above persons are living at a different address from you, please state the reason why:

Please state your reason for applying for accommodation:

Is anyone on your application pregnant? Yes No

If yes please complete the boxes below:

Name of pregnant person

Expected date of delivery

4. Present and previous addresses

All addresses where you have lived during the last 5 years (including present address)	Type of tenancy	Reason for leaving	Dates	
			From	To

If this is a joint application with your partner, their address details should be listed below	Type of tenancy	Reason for leaving	Dates	
			From	To

5. Present addresses of relatives

If you are living outside the Brentwood Borough, please provide names and addresses of close relatives who live in the Borough.

Name	Address	Relationship	Dates	
			From	To

6. Other properties

Do you/your partner own a property in this country or abroad? Yes No

Please give full details

Do you/your spouse have any other legal interest in another property? Yes No

Please give full details

Have you/your spouse ever owned a property? Yes No

Please give full details

Please provide date of sale or disposal

7. Previous tenancies with any council

	Applicant	Partner
Name of council		
Address at that time		
Date tenancy ended (month & year)		
Reason tenancy ended		

8. Other people at your address and not requiring accommodation

Forename(s)	Surname	Sex M/F	Date of birth	Relationship to applicant (if any)

9. Present accommodation

Please tick the type of property you currently occupy:

House Bungalow Flat Maisonette Studio flat/bedsit Hostel

Rooms in a house Bed & breakfast Mobile home Caravan No fixed abode

Other

If you live in a flat or maisonette, on which floor is your accommodation

Please complete the following:

Note: Exclude toilet and bathroom	Bedrooms	Kitchens	Lounges/Dining rooms	Total
Total number of rooms in whole dwelling				
Number of rooms available for the exclusive use of yourself and those persons requiring accommodation				
Number of rooms shared with the principal householder and his family, or others in the household				

10. Use of bedrooms for all people living at your address

	Name of person		Names of person
Bedroom 1		Bedroom 4	
Bedroom 2		Bedroom 5	
Bedroom 3		Other room(s) used for sleeping (specify)	

11. Amenities

(Answer Yes or No)

Have you the use of piped water supply?

Have you the use of a bath or shower?

If Yes, is it shared with another household?

Is the toilet inside?

Do you share the toilet with another household?

Have you the use of a hot water supply?

Have you the use of a kitchen?

If Yes, is it shared with another household?

Do you have any heating in your home?

Do you have access to a garden?

If you live in an upper floor flat does it have a lift?

Is your home subject to a Closing Order or Repair Notice?

12. If living with relatives or friends

(If you are joint applicants living separately, complete both columns).

(Answer Yes or No)

Is the property:

1. Applicant

2. Partner

Owned by them?

Rented from the Council?

Rented from a housing association?

Rented from a private landlord?

Tied to their employment?

If not living with relatives or friends

(If you are joint applicants living separately, complete both columns).

Is the property:

(Answer Yes or No)

Owned by you?

A caravan/mobile home?

Tied accommodation?

H.M. Forces accommodation?

If Yes expected discharge date?

Rented by you?

If rented, please give landlord's name and address

1.	2.
----	----

Rent/contribution per week/month

1. £ : p

2. £ : p

If you are a private tenant, when did your tenancy start?

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Please provide date when the tenancy is expected to end

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Do you receive Housing Benefit?

Yes

No

If you have a formal tenancy agreement, please enclose a copy when you return this application form

If you are 60 years or older do you wish to be considered for sheltered accommodation

Yes

No

Do you need ground floor accommodation

Yes

No

Note: Restricting your choice under Choice Based Lettings may delay success in obtaining alternative accommodation.

13. Special circumstances

If your medical condition is affected by your current accommodation you may be awarded points under the Council's Medical Assessment System.

Please specify any medical factors that relate to your application:

Is any person requiring accommodation disabled? Yes No

Do you need any additional form of care and support to enable you to stay where you are until you are moved? Yes No

If Yes - What? e.g. Home care, Community Alarm, Aids and Adaptions (i.e grab rails, stairlift).

Please give names and dates of birth of those who need this care and support:

Name	Date of birth

Please specify any special equipment/facilities required if you were offered a property e.g. wheelchair access.

14. Moving to housing with care and support

In your new home do you feel you will need care and support for: (Tick all that apply)

Mental illness

Learning difficulties

Substance abuse (such as drugs or alcohol)

Physical disabilities

Being elderly and frail

Other reasons

Please explain why:

15. Care and support at current address

Do you already have - (tick all that apply)

Social worker Community nurse Key worker/care manager Home carer
Occupational therapist Probation officer Community psychiatric nurse Other

If you do have any of the above, please give name of person (and office or organisation address including telephone number where applicable) as we may wish to contact them -

16. Additional Information

If there are any special circumstances which affect your application that are not detailed elsewhere in the form, please specify in this section.

17. Ethnic origin of household

The purpose of this question is to help us to discover the extent to which racial discrimination prevents households gaining equal access to housing accommodation.

The statistical evidence gathered from this question will be used to help us to combat racial discrimination by improving the equality of our services.

How would you describe the ethnic origin of your household?

(Please tick one box only)

I do not wish to answer this question.

White

- British
- Irish
- Any other White background

Mixed

- White & Black Caribbean
- White & Black African
- White & Asian
- Any other Mixed background

Chinese and other ethnic groups

- Chinese
- Other ethnic groups

Black or Black British

- Caribbean
- African
- Any other Black background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

18. Proof of circumstances

Please provide the proof required to support your application such as child benefit, local connection with the Borough, such as six months residency, employment or support needs, including (if you are a private tenant) a formal tenancy agreement. We need to see the documents below before processing your application.

Please tick to say which documents you have enclosed.

- Proof of ID, e.g, copy of your passport or birth certificate.
- Proof of residency in the borough for 6 months, e.g, a copy of documents showing your name and current address and six months prior.
- A copy of certificate of pregnancy.
- Evidence of child benefit, e.g, a letter from child benefit.
- Evidence of residency at your current address, e.g, documents showing current details.
- Proof of sale from previously owned property, e.g, letter from your solicitor.

If you do not enclose these documents with your application we will return this form to you without registering it.

19. Re-registration

In order that the Council can keep its records of your application up to date, you are required to re-register your application after 12 months, otherwise it will be assumed that you have obtained adequate accommodation and your application will be cancelled, (a reminder will be sent). Therefore, if you move in between reviews, you must tell us so that your application can be reassessed.

20. Authorisation

I consent to the Council discussing my housing application with other Council departments/agencies and professionals, if it is relevant to my application. This includes my existing landlord (if applicable) and any housing association I might be nominated to.

Section 171 of the Housing Act 1996 makes it a criminal offence to knowingly or recklessly give false information, or withhold information relevant to your application. If found guilty of such an offence, you may be liable for a fine up to £5,000 and lose your tenancy.

I give my consent for personal information provided as part of this application to be held on computer or other relevant filing systems and to be shared with other accredited organisations or agencies in accordance with the Data Protection Act 1988.

I/we consent to the authorisation and I/we declare that the information given on this form is true and correct and undertake to advise the Council of any change in my/our circumstances.

Applicant's signature: _____ Date: _____

Spouse's/partner's signature: _____ Date: _____

Please complete & return to:

Housing Services, Brentwood Borough Council, Town Hall, Ingrave Road
Brentwood, Essex CM15 8AY.