

The Estate Office Franklands Village Haywards Heath West Sussex, RH16 3RS Tel: 01444-413771 Email: enquiries@fvha.org.uk

APPLICATION FOR HOUSING WITH FRANKLANDS VILLAGE HOUSING ASSOCIATION

Please ensure you complete all sections. Any uncompleted sections will delay processing your application.

DOCUMENTATION REQUIRED

On completing this form we require the following documents:

- Proof of identification (birth certificate, passport, new type driving licence, approved immigration status document) (*copies only*)
- Proof of residence (household bills, tenancy agreement, benefits agency document) (copies only)
- Proof of National Insurance Number (copy only)
- <u>3 months</u> bank statement (copies only)
- <u>3 months</u> proof of Income (payslips, benefit award letters) (copies only)

The information given will be treated as strictly confidential. Please fill in all sections in full.

Please contact us if you need help or advice.

Please ensure you complete all sections. Any uncompleted sections will delay processing your application.

	Part 1- APPLIC	CANT DETAILS			
You (Applicant 1)	Please give details below:	Your Partner (Joint Applicant 2)	Please give details below		
Surname		Surname			
First Names		First Names			
Title (please delete as applicable)	Mr/Mrs/Ms/Miss/Other:	Title (please delete as applicable)	Mr/Mrs/Ms/Miss/Other:		
Marital Status		Relationship to Applicant 1			
Date of Birth		Date of Birth			
National Insurance No.		National Insurance No.			
Home Phone Number		Home Phone Number			
Work Phone Number		Work Phone Number			
Mobile Number		Mobile Number			
Email Address		Email Address			
Nationality		Nationality			
First language		First language			

If we contac	t or visit you,	do we need	l an interpreter	or someone
to help with	communicati	on?		



If Yes, please give details: _____

Your current address:
Postcode:
Do you want us to send your correspondence to a different address? If so, please give that address:
Postcode:

Part 2 - ABOUT YOUR HOUSEHOLD

In this section we ask for personal information that you may find sensitive. All information will be treated in confidence but you must answer all questions to allow us to process your application

Please tell us about any other people that live with you, even if they are not moving with you.

Also provide proof that all those listed below do live with you, for example copy of medical cards. If you do not provide this evidence we may not be able to award points for overcrowding.

Full Name	Date of Birth	Gender (M/F)	Relationship To you	Is this person living with you now 'Yes' or 'No'	Will this person be moving with you 'Yes' or 'No'
1					
2					
3					
4					
5					
6					
7					
8					

Are you or anyone else who wishes to move with you expecting a baby?

If 'Yes' give the date the baby is due/..... and enclose proof of pregnancy, eg MAT B1

Part 3 – YOUR PRESENT HOME

How many bedrooms	low many bedrooms are there in your present home?							
Are you lacking any o or sharing with people friends?	-							
	Lacking	Sharing	House					
Kitchen			Bungalow					
Bathroom			Flat					
Living Room			Bedsit					
Inside WC								
Hot Water Supply								

Part 2	- ABOUT YOUR HOUSEHOLD	

Part 2 - ABOU			SERULU			
In this section we ask for personal inform information will be treated in confidence us to process your application		-	-			
Please indicate which of the following be	st desc	cribes yo	ur present	situation:	1	
I own my own home		I live wit	h friends o	r relatives		
I own my own home through a 'Shared Ownership' or similar scheme		l live in a	a caravan/r	nobile horr	ne/boat	
I rent from a Housing Association			iting to be o /residential		from	
I rent from a Local Authority		I am in I	HM Forces			
I rent from a private landlord		I am in p	orison			
I rent from my employer		I live in a	a hostel, Ba	&B or refug	je	
I am a lodger/sub tenant		I have n	o fixed add	ress		
I live with my parents		Other (p	lease spec	ify below)		
If you rent your accommodation please g	ive yoι	ur Landlo	ord's detail	s:		
Landlords Name:						
Landlords Address:						
Date tenancy commenced://						
Do you owe any arrears? If Yes, how much £		Ye	s 🛄	No		
Please tick if any of the following stateme If you tick any of the boxes, please enclo- received from your landlord, employer, le	se cop	ies of an	-			
		,	You the applicant	Joint applicant	Date yo lea	
I have received a 'Notice to Quit' (Section 21					/	
from my Landlord		•)			/	_/
I rent my home but don't have a written tena agreement	ncy				/	_/
I rent my home and have a assured shorthol	ld tenar	псу			/	_/
I rent my home and have an assured tenanc	;y				/	_/
My/our house is to be repossessed or demo	lished				/	_/
I have to leave my house, which I rent from I	my emp	oloyer			/	_/
I am leaving the forces/forces accommodation	on				/	_/
I have been asked to leave my family/friends	s home				/	_/
Other please state:						

Part 3 – YOUR PRESENT HOME	
Do you think that your home has any of the following problems?	
My home has structural problems/is unstable	
My home has very bad dampness/water penetration	
My home has moderate dampness/water penetration	
My kitchen or bathroom does not have a window or other ventilation (like a fan)	
Access to my home is dangerous or awkward	
Please provide copies of letter(s) from Private Sector Housing that they have insperior property and a notice has been served on your landlord to carry out any repairs.	ected your

Please remember that we will visit you to make sure that the information provided on this form is accurate. This will involve looking at the property and any problems it might have.

Part 3a - REASONS FOR APPLYING AND ADDITIONAL INFORMATION

Please tell us why you are in housing need and the reason for your application?

Is there any information relating to your housing situation that you would like us to know about?

Part 4 – YOUR PREVIOUS ADDRESSES

In this section we ask for personal information that you may find sensitive. All information will be treated in confidence but you must answer all questions to allow us to process your application

Please give details of all the addresses where you have lived in the past 5 years.

Address	ddress Dates you lived there: If rented – nam I fowned -				Reason for leaving
	From	То			
	//				
	//				
	//	//			
	//	//			
Do you have any rent arr	ears at any of	f the previou	s addresses?	Yes	No
If Yes, please say how m	uch you owe:			£	
Have you ever been evict the Tenancy Agreement o				Yes	No
If Yes, please give addre	ess of proper	ty and reaso	n:		

Part 4 – Y	OUR PREVIOUS ADDRE	SSES
If Yes, please give address of pro	operty:	
Dates you lived there From/ Whose tenancy was this?	./ to//	
Part 5 –	PERSONAL INFORMATI	ON
Have you ever been convicted of a		Yes No
If Yes, please give details:		
If you served a prison term, please	e give dates:	
From// to//		
Part 5a - ANTI-SOCIA	L BEHAVIOUR/ CRIMINA	
Have you ever been evicted from a property for:	First ApplicantRent ArrearsImage: Colspan="2">Image: Colspan="2"Rent ArrearsImage: Colspan="2">Image: Colspan="2"Anti-social behaviourImage: Colspan="2">Image: Colspan="2"Noise nuisanceImage: Colspan="2"	Joint ApplicantRent ArrearsImage: Colspan="2">Image: Colspan="2"Anti-social behaviourImage: Colspan="2">Image: Colspan="2"Noise nuisanceImage: Colspan="2"
Does anyone in the household have a history of alcohol or drug use?	Yes No 🗌	Yes No
Has anyone on the application ever been arrested for, cautioned or convicted of a criminal offence other than a speeding offence?	Yes No Please give details and dates	s of the offence:
Does anyone in the household report to a probation officer?	Yes No Please specify below:	
Part 8– RELATIONS	SHIP TO STAFF OR BOAI	RD MEMBER/S
To your knowledge, are you or any to any member of the Franklands staff or Board?		

Part 9 – MONEY MATTERS

In this section we ask for personal financial information that you may find sensitive. All replies will be treated in confidence but you must answer all questions to allow us to process your application. From the list below please give the economic status of yourself and your household members.

Name		Economic Stat	us	Give details of income
1				£
2				£
1				£
2				£
3				£
4				£
5				£
6 7				£
				L
1 = Full-time work of 30 or more hours per week		6 = Not seeking wo		
2 = Part-time work being less than 30 hrs per w3 = In training – i.e. New Deal	eek			o long term sickness/
4 = Job seeker	9 = Child under 16			
5 = Retired	0 = Other adult			
Please provide full details of income of appl	icar	nt and joint applicar	nt	
Income		Amount		How Often?
Take Home Pay	£			
Working Families Tax Credit	£			
Child Tax Credit	£			
Child Benefit	£			
ESA	£			
Disability Living Allowance/PiP	£			
Income Support	£			
Job Seekers Allowance/Employment Seekers Allowance	£			
Personal Pension	£			
State Pension/Pension Credit	£			
Other Income (please state)	£			
Do you currently receive Housing Benefit?		Yes		No 🔄
Do you currently have a bank account?		Yes		No 🛄
Please note: it is a requirement of Frankland rent for your home you must make payment				

P	Part 10 – E			RIGIN					
What is your ethnic origin? Plea	se tick one	box f	for eac	h pers	on.				
	Applio	Applicant Other people							
White:	1	2	1	2	3	4	5	6	7
British									
Irish									
Bosnian									
Polish									
Other please state:									
Dual Heritage/Mixed Race									
White & Black Caribbean									
White & Black African									
White & Asian									
Other please state:									
Asian or Asian British:									
Pakistani									
Indian									
Bangladeshi									
Other please state:									
Black or Black British:									
Caribbean									
African									
Other please state:									
Other ethnic group:									
Chinese									
Iraqi									
Iranian									
Afghan/Kurdish									
Other please state									-
Prefer not to say:									

Do you have a support worker, family member or friend who helps you with housing matters?		
Yes No		
If Yes, do you give permission us to discuss issues concerning your tenancy with this person?		
Yes No		
If Yes, please give details below:		
Who does this person support?		
Name of support person		
Relationship, for example family member, support worker		
Address		
Postcode		
Telephone Number		
Please give us details of your next of kin/preferred contact to contact in the event of an emergency.		
Name		
Relationship to you		
Address		
	Postcode	
Telephone Number		

YOUR DATA

The information you give in this form is subject to the requirements of the General Data Protection Regulation (GDPR) that came into force on 25 May 2018. By signing this form you are providing Franklands Village Housing Association with consent to use your personal and sensitive data that you have provided. Your personal details (personal and sensitive data) will be held and processed by Franklands Village Housing Association to help assess your needs and, in particular, the provision of services for which you may be eligible. Franklands Village Housing Association requires the information on this form to process your application to join the housing register. If your application for housing is successful the information supplied in this form will also be used for housing management purposes.

FVHA ensures compliance with our obligations under GDPR by:

- Keeping personal data up to date
- Storing and destroying it securely
- Not collecting or retaining excessive amounts of data
- Protecting personal data from loss, misuse, unauthorised access and disclosure by ensuring appropriate measures are in place to protect personal data

The personal details you provide (personal and sensitive data) may also be shared with certain external agencies that help assess and/or give services, as part of any statutory duties requiring such a disclosure and to protect the public funds it collects and administers. Any data may be used to prevent fraud or the misuse of resources.

You may ask for a copy of your personal information and how it is stored and used by writing to us.

FRAUD

We are committed to preventing and detecting all fraud. It is an offence under the Forgery and Counterfeiting Act 1981 to hold or present false documents such as birth certificates, passports, bank statements and so on, with a view to obtaining goods or services such as temporary accommodation or permanent housing from Franklands Village Housing Association. If we detect fraud, we will take legal action against you.

CHANGE OF CIRCUMSTANCES

It is important that you tell us about any change in your circumstances as this may affect your housing application. Please contact us immediately if your circumstances change, for example, if your address changes or your household members change.

FALSE STATEMENTS

To prevent abuse of the housing register, it is a criminal offence for anyone to try to obtain accommodation from Franklands Village Housing Association by knowingly or recklessly giving a false statement or knowingly withholding information. Offences under these provisions are prosecuted in the magistrate's court. Franklands Village Housing Association will seek possession of a tenancy that was granted as a result of a false statement.

Signed (Applicant)

Signed (Joint Applicant)

Date

FOR OFFICE USE ONLY Action/Information Requested:		Points
Date By:	:	
Action/Information Requested:		Size
DateBy:		