



FINANCIAL ASSESSMENT FORM

Income and Outgoing Details. Please complete as accurately as possible.				
List all income details	Income Amounts in £	How Often is this paid? e.g. weekly	Income calculated as a monthly figure £	Who is this paid to?
Total Wages/Salary NET				
Child Benefit				
Carers Allowance				
Income Support				
Jobseekers Allowance				
Working Tax Credits				
Child Tax Credits				
OR Universal Credit				
Child Care Costs				
Company Pension				
State Retirement Pension				
Pension Credit				
Incapacity Benefit or ESA				
DLA Care/Mobility				
Attendance Allowance				
Maintenance				
Any other Income				
TOTAL MONTHLY INCOME _____				

List all outgoing details	Income Amounts in £	How Often is this paid? e.g. weekly	Income calculated as a monthly figure £	Who is this paid to?
Rent not covered by HB				
Utility Bills Gas				
Electric				
Water				
Council Tax				
TV Licence				
Household				
Travel costs				
Mobile/landline costs				
Payment to occupation or private pension				
Any other expenditure				
TOTAL MONTHLY OUTGOINGS _____				

Your Consent

Data Protection

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.

Consent

I/we agree for the information I have provided to Franklands Village Housing Association to be used to update their customer records and to provide housing where appropriate

Declaration

I/we understand if any of the information provided is later determined to be incorrect or untrue consideration for housing may be declined and/or where a tenancy has been offered and accepted that legal action to repossess the property will commence

Please read the following statements and sign below

- As far as I know, the information in this financial assessment is true and complete
- I understand that you may immediately end any tenancy I get as a result of a false statement
- I understand that any information relating to my housing application will be place on your computer

Applicant One	Applicant Two
17. Signatures:	18. Signatures:
Full Name (PRINT)	Full Name (PRINT)
Signature	Signature
Date	Date