

# The East Staffordshire Housing Register

Application Form  
June 2009



## Registration Form

Office Use Only	
Applicants Full Name	
Date Received	
Registration Number	
Registration Date	
Banding	

**If you would like this document in another language or format, or if you require the service of an interpreter, please contact us. See contact details at the end of form.**

- Use this form to apply for affordable accommodation in the South Staffordshire and North Warwickshire area
- Please complete all sections of the registration form.
- If the form is not completed correctly your registration may be delayed
- The East Staffordshire Housing "Finding a Home" leaflet has valuable information on how the scheme works and will help you in completing this registration form.
- You will not be able to express an interest against properties advertised until you have received confirmation that you are accepted onto the register.

اگر این اطلاعات را به زبانی دیگر و یا در فرمتی دیگر میخواهید لطفاً از ما درخواست کنید  
Farsi

यदि आपको सूचना किसी अन्य भाषा या अन्य रूप में चाहिये तो कृपया हमसे कहे  
Hindi

ئەگەر زانیاریت بە زمانیکی که یا بە فۆرمیکی که دەوی تکایه داوامان لی بکه  
Kurdish

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔  
Urdu

Jeżeli chcieliby Państwo uzyskać informacje w innym języku lub w innym formacie, prosimy dać nam znać.  
Polish

Obratite nam se ako želite ove informacije na nekom drugom jeziku ili u drugačijem formatu.  
Croatian

如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。  
Cantonese

如欲索取以另一語文印制或另一格式制作的资料，请与我们联系。  
Mandarin

## SECTION 1 - Personal Information

<b>Main Applicant details</b>	
First name	
Middle name	
Last name	
Other Name (s)	
Title	Mr / Mrs / Miss / Ms / Other
Gender	Male / Female /
Email Address	
National Insurance Number	
Date of Birth	
<b>Joint Applicant details</b>	
First name	
Middle name	
Last name	
Other Name (s)	
Title	Mr / Mrs / Miss / Ms / Other
Gender	Male / Female
Email Address	
National Insurance Number	
Date of Birth	
Relation to main applicant	

**SECTION 2 – Area of Choice** To ascertain future need for housing within the area you have chosen, would you please indicate which one of the following area you would like to live in?

Note: this does not necessary mean that properties are available in these areas. By completing this section you will not restrict the areas you are offered when expressing an interest in available properties.

Abbots Bromley		Newborough	
Anglesey		Okeover	
Barton Under Needwood		Outwoods	
Blithfield		Ramshorn	
Branston		Rocester	
Brizlincote		Rolleston on Dove	
Burton (Parish/Ward)		Shobnall	
Croxden		Stanton	
Draycott in the Clay		Stapenhill	
Dunstall		Stretton	
Ellastone		Tatenhill	
Eton Park		Tutbury	
Hanbury		Uttoxeter Rural (Villages)	
Hoar Cross		Uttoxeter Urban (Town)	
Horninglow		Winhill	
Kingstone		Wootton	
Leigh		Wychnor	
Marchington		Yoxall	
Mayfield			

**SECTION 2B – Housing Options**

Are you interested in any other housing options? Please tick one or more Housing Options	
Shared ownership	
Low cost home ownership	
Private rented accommodation	
Mutual Exchange	
Other, please give details	

### SECTION 3 – Contact Details

<b>Main Applicant</b>
Current Address
Post code
Is your contact address different from your current address? Yes/No
If Yes Please provide details below:
Address
Post code
<b>Joint Applicant</b>
Is joint applicant's current address different from the main applicant's current address? Yes/No
If Yes Please provide details below:
Address
Postcode
<b>Contact Phone Numbers</b>
Home Telephone (include STD code):
Work Telephone (include STD code):
Mobile:
Voice / Minicom:
Please give preferred method to contact:

### Immigration Control – Eligibility for housing allocation

Applicants who are subject to immigration control and fulfil the following criteria may be eligible for housing allocation:

- Refugee status
- Exceptional leave to remain – provided there is no condition that you shall not be a charge on public funds.
- Indefinite leave to remain provided you are habitually resident in the CTS (Common Travel Area) and leave to remain was not granted in the previous 5 years on the basis of sponsorship in relation to maintenance and accommodation.
- Nationals to a country that have ratified the European Convention on Social and Medical Assistance (ECSMA) or the European Social Charter (ESC) provided you are lawfully present in the UK.
- From one of the "A8" Countries and meet conditions as determined by the Secretary of State.

If you are unsure about your eligibility you should register your application together with your status. You will be advised whether you will be placed into a band.

<b>Main Applicant</b>	
ARE YOU SUBJECT TO ANY IMMIGRATION CONTROLS?	Yes / No
<b>Joint Applicant</b>	
ARE YOU SUBJECT TO ANY IMMIGRATION CONTROLS?	Yes / No

**SECTION 4 - Current Home**

<b>Main Applicant</b>		
When did you move into this property?		
<b>Joint Applicant</b>		
When did you move into this property?		
Type of Property you currently reside in – please delete those not applicable.  House / Bungalow / Maisonette / Flat / Bed sit / Hostel / B&B or hotel / Caravan / Boat House / Prison / Hospital / MOD/ Any other type of accommodation give details		
Which floor		
No. of Bedrooms		
No. of Living rooms		
Please tick the appropriate box	Share	Lack
Hot water supply		
Heating		
Garden		
Bathroom		
Kitchen		
Living room		
Inside toilet		

Please tick what type of Tenure you have:	
Owner	
Private Tenant	
Tied tenant	
Council Tenant	
Housing Association Tenant	
Lodger	
Living with Friends or Family	
Other (give details)	
Landlord's/Mortgage Lenders Name, address and telephone	
Details of current balance outstanding/mortgage debt or any rent arrears.	
Provide name(s) on Tenancy Agreement/Mortgage Agreement	



--	--	--	--	--	--	--	--

**SECTION 5A – Pregnancy**

Is any member of the household expecting a baby?	Yes / No
If Yes, Please give name of person pregnant	
Please give baby due date	

**SECTION 6 - Current circumstances**

Do you think you are Homeless or threatened with Homelessness?	Yes / No
If Yes, Please provide details example, if the property is subject to closing order, etc	
If Yes, Please provide details and copies of any court orders, eviction warrants, notices from landlord	
Are you seeking alternative housing because you or someone living with you has a medical condition, either physical or welfare, which is being affected by your current housing?	Yes / No
If Yes, Please provide brief details of how housing is affecting you. A medical form may be issued to you if we require further information.	
Do you need level access facilities e.g. wheelchair access, level access or walk in shower, or other specially adapted features?	Yes/No
If Yes, Please provide brief details of what facilities are required	
Do you receive services from other agencies e.g. Social Services, Occupational Therapist, Community Psychiatric Nurse?	Yes/No
If Yes, Please provide details name, address and telephone	

Are you in any way disabled?	Yes / No
If yes, please give brief details	

Please provide details if you have a legal interest in any property in the UK or abroad

**SECTION 7 - Local Connection**

Family care needs: Do you need to move to care for, or receive care from, a relative?	Yes / No
If Yes, Please provide details name, address and telephone	
Do you want to move near to a close family relative i.e. mother, father, sister, brother, daughter or son?	Yes / No
If Yes, Please provide details name, address and telephone	
Are you or any person moving with you currently employed?	Yes / No
If Yes, Please give details of who	

Where do you work?	
Name, address and telephone of your employer	
How long have you worked here?	
Are you a permanent or a temporary employee?	
Are you Full-time or Part-time	

**SECTION 8 - Housing History**

Please provide last 5 Years Housing History

**Main Applicant**

Address	Date from	Date to	Tenure Type	Name of Mortgage lender / landlord	Reason for leaving

**Joint Applicant**

Address	Date from	Date to	Tenure Type	Name of Mortgage lender / landlord	Reason for leaving

**SECTION 9 - Additional Information**

Please use this section to add any additional information which will assist in processing your registration. You may include an additional sheet if necessary.

## SECTION 10 - Equal Opportunities

East Staffs Housing is committed to ensuring equality and diversity throughout our services. To help us with monitoring and for this purpose only, we would like you to complete this section of the form. The information is confidential and will be for statistical purposes. If you decide not to complete this section it will not affect your registration.

Please tick the appropriate box

	Ethnicity	Main Applicant	Joint Applicant
	<b>White</b>		
1	British		
2	Irish		
3	Any other White background (please state.....)		
	<b>Mixed</b>		
4	White and Black Caribbean		
5	White and Black African		
6	White and Asian		
7	Other Mixed background (Please state.....)		
	<b>Asian or Asian British</b>		
8	Indian		
9	Pakistani		
10	Bangladeshi		
11	Other Asian background (Please State.....)		
	<b>Black or Black British</b>		
12	Caribbean		
13	African		
14	Other Black background (Please state.....)		
	<b>Other</b>		
15	Chinese		
16	Other Ethnic Group (Please state.....)		
18	Gypsy/Romany/Irish Traveller		
17	Refuse to answer		

## SECTION 10A – Nationality

Please tick the appropriate box

Nationality	Main Applicant	Joint Applicant
<b>UK National (returning to UK or arriving in UK for the first time)</b>		
<b>EEA National</b>		
Czech Republic		
Estonia		
Hungary		
Latvia		
Lithuania		
Poland		
Slovakia		
Slovenia		
Bulgaria		
Romania		
Other EEA National		
<b>Non-EEA National</b>		
<b>Not Stated</b>		

## SECTION10B

### Rehabilitation of Offenders Act 1974 –

Certain convictions are taken into account when applications are being assessed.

Has anyone who will be residing with you been convicted for Anti Social Behaviour?	Yes/No
If Yes, Please give details i.e. Anti Social Behaviour Order, sex offences or complaints about previous tenancies and the date of the conviction(s) below	
Convictions	Date

### SECTION 11 – Declaration

I declare that the details I have given are true, and I have not left out any information that may affect my application. I understand that giving false or misleading information may result in registration being refused, offers of accommodation being withdrawn, or action being taken to terminate any tenancy granted.

I will inform East Staffordshire Housing of any changes of circumstances.

I consent to the information I have provided on this form being held on computer and/or on paper, together with any relevant supporting information, and to the information being shared with, and processed by member organisations of the East Staffordshire and UChoose Partnership, for the purpose of securing re-housing, for audit and statistical purposes, and for fraud prevention.

I consent to credit checks being carried out to establish my financial status. I understand that I can request details of any credit reference agencies used so I can verify with them the information they provide. I understand that if I default on any future tenancy obligations this information may be released to authorised debt recovery agencies and may affect future applications I make for tenancies, credit and insurance.

I confirm that neither I nor anyone who will reside with me as a member of my family are subject to immigration control within the meaning of the Asylum and Immigration act 1996.

I understand that completing this form does not commit any member organisation of the East Staffordshire Housing Partnership or UChoose Partnership to offering a tenancy.

I understand that if I, or a member of my household, have any connection with any **East Staffordshire Housing or UChoose Partner** employee or board member, or any company, organisation, or individual with whom **East Staffordshire and UChoose Partners** do business, I should declare this.

**I have checked the information on this form and accept it is correct. I accept this information will only be used by East Staffordshire Housing and UChoose for the purposes specified above and within the rights of individuals under the Data Protection Act, 1998.**

The Staffordshire Housing Partners and the UChoose authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

	Main Applicant	Joint Applicant
Do you have a connection to declare	Yes/No	Yes/No
By connection we mean, if you or any of your close relatives are employed by, or a board member of any of the East Staffordshire Housing Partner or UChoose partner organisations or have been within the past 12 months.		
If Yes, Please provide the following details below:		
Name:		
Job Title:		
East Staffordshire Housing or UChoose Partner name, address and telephone:		
I authorise East Staffordshire Housing partners & UChoose partners to make enquiries and/or check information regarding this application, including appropriate enquiries relating to any criminal offence which may have been disclosed.		
I AGREE with this declaration	Yes / No	Yes / No
I am the Main or Joint applicant.	Yes / No	
If No, please provide your name, address, telephone and your relationship with the main or joint applicant.		

## Main Applicant

PRINT NAME	
SIGNATURE	
DATE:	

## Joint Applicant

PRINT NAME	
SIGNATURE	
DATE:	

For evaluating and verifying you must send your completed registration form to Trent & Dove Housing or your chosen lead UChoose partner as per section 2A. The address details are at the end of the form.

We are committed to Delivering Diversity and Equality in our services. We are working to improving access to housing for all members of the community.

If a customer needs any help or advice in accessing housing, or finding out about available properties, they can approach any one of us for help. If their first language is not English, we can arrange for an appointment to be made with an interpreter or access to an appropriate language service.

We can also provide information in other suitable formats for customers who may have specialised requirements. Customers will advise us if they need this.

Our intention is to develop a scheme that complies with relevant legislation (both U.K. and European) and will strive to deliver best practise in Diversity and Equality.

### What happens next?

Your Registration Form will be evaluated and verified. We may contact you to discuss your registration form. You will be notified in writing whether we can accept your registration, what banding you are eligible for and your date of registration.

**If you have any queries in respect of your application please contact Trent & Dove Housing at one of the addresses below.**



Trinity Square  
Horninglow Street  
Burton Upon Trent  
DE14 1BL  
Tel: 01283 528528



11 Bradley Street  
Uttoxeter  
Staffs  
ST14 7QA  
Tel: 01889 561870

Alternatively email us: [enquiries@trentanddove.org](mailto:enquiries@trentanddove.org)

# CHARITABLE STATUS

## Application Form Supplement



Trent & Dove Housing with effect from 1<sup>st</sup> April 2009 is registered as a charitable organisation and therefore has to ensure that tenancies are granted to those applicants who qualify as “charitable beneficiaries”. Charitable beneficiaries are for example people of pensionable age, registered disabled, those with chronic or long-term physical or mental health problems and those in receipt of welfare benefits or those who have a net household income of approximately less than £30500.00.

You are not however, prevented from joining the housing register if your current circumstances would suggest that you are not eligible. Every applicant will be assessed fully at the point of being offered a property, whether or not they qualify, due to potential changes in applicants’ circumstance.

**Please answer the following questions and supply proof where requested.**

Name..... Date of birth.....

Current address.....

I am 60 years old or over    Yes     No

I am registered disabled    Yes     No     Reg No.....

I am in receipt of long-term sickness/care/mobility allowance(s)  
Yes     No     **Please supply evidence**

I am in receipt of other welfare benefits/tax credits (excluding child benefit)  
Yes     No     **Please state which below and supply evidence**

.....

If you have answered “No” to all the above, please state your weekly or monthly net income  
£..... **Please supply proof e.g. wage slips**

I have savings    Yes     No     If Yes, state amount    £.....

If you own any properties, state approximate value    £.....

**I understand that this information forms part of my application for housing and is covered by the declaration within the main application form.**



[www.uchoosehomes.co.uk](http://www.uchoosehomes.co.uk)

For those of you wishing to also join the South Staffordshire & North Warwickshire Sub-Regional Choice Based Lettings partnership you will not need to complete an additional application form for us to register your application.

We do however ask that the following information is completed:

**Area of Choice**





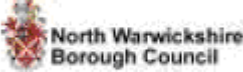





Local Authority Area(s)	Please tick area(s) you would like to be re-housed	You will be assessed by and eligible to bid for properties for:
Cannock		Cannock Chase District Council
Lichfield		Homezone Housing
North Warwickshire		North Warwickshire Borough Council
Nuneaton and Bedworth		Nuneaton and Bedworth Borough council
South Staffordshire		South Staffordshire Housing Association South Staffordshire Council
Tamworth		Tamworth Borough council
East Staffordshire		Trent and Dove Housing Association

**Lead Landlord Choice**

For evaluating and verifying your registration form, you must choose a lead UChoose partner. Please tick one box.

Cannock Chase District Council	
Homezone Housing	
North Warwickshire Borough Council	
Nuneaton and Bedworth Borough council	
South Staffordshire Housing Association	
South Staffordshire Council	
Tamworth Borough Council	
Trent and Dove Housing Association	

## UChoose Partners Contact Details

<u>Name</u>	<u>Address</u>	<u>Telephone &amp; E-mail</u>
	Cannock Chase Council PO Box 28 Beecroft Road Cannock Staffordshire WS11 1BG	01543 462621  <a href="mailto:customerservices@cannockchasedc.gov.uk">customerservices@cannockchasedc.gov.uk</a>
	East Staffordshire Borough Council Town Hall Burton upon Trent Staffordshire. DE14 2EB	01283 508000  <a href="mailto:housing@eaststaffsbc.gov.uk">housing@eaststaffsbc.gov.uk</a>
	Lichfield District Council District Council House Frog Lane Lichfield Staffs WS13 6YY	01543 308000  <a href="mailto:enquiries@lichfielddc.gov.uk">enquiries@lichfielddc.gov.uk</a>
	South Staffordshire Council Council House Wolverhampton Road Codsall South Staffordshire WV8 1PX	01902 696000  <a href="mailto:info@sstaffs.gov.uk">info@sstaffs.gov.uk</a>
	North Warwickshire Borough Council South Street Atherstone Warwickshire CV9 1DE	01827 715341  <a href="mailto:customerservices@northwarks.gov.uk">customerservices@northwarks.gov.uk</a>
	Tamworth Borough Council Marmion House Lichfield Street Tamworth Staffordshire B79 7BZ	01827 709709  <a href="mailto:enquiries@tamworth.gov.uk">enquiries@tamworth.gov.uk</a>
	Nuneaton & Bedworth Borough Council Town Hall Coton Road Nuneaton Warwickshire CV11 5AA	024 7637 6376  <a href="mailto:customer.services@nuneatonandbedworth.gov.uk">customer.services@nuneatonandbedworth.gov.uk</a>
	HomeZone Living 5 Stowe Road Lichfield Staffordshire WS13 6WA	01543 420800  <a href="mailto:customerservices@homezonehousing.org.uk">customerservices@homezonehousing.org.uk</a>
	Trent & Dove Housing Trinity Square Horninglow Street Burton-upon-Trent Staffordshire DE14 1BL	01283 528528  <a href="mailto:enquiries@trentanddove.org">enquiries@trentanddove.org</a>
	South Staffordshire Housing Association Acton Court Acton Gate Staffordshire ST18 9AP	01785 312000  <a href="mailto:enquiries@ssha.co.uk">enquiries@ssha.co.uk</a>