



Community Based Housing Association
promoting sustainable communities

To whom it may concern,

Re: - Housing Application

We are happy that you are taking the first steps to joining our community. Before we can consider you for our housing waiting list, we need you to complete the attached application in as much detail as you are able, all sections should be completed or noted if not applicable. This will place us in a better position to accurately assess your situation. All incomplete application forms will be returned.

We also require various pieces of evidence, before we are able to process any application form. This is required to verify your situation and allows us to build a stronger case of need. We have collated two lists of documents we require below; the first list is necessary for all applicants whilst the second list may only be applicable if you have any extenuating circumstances.

Evidence necessary for all application forms:

- Proof of Identity for both applicants e.g., Birth certificate/ Passport/ Driving license
- Proof of Address for both applicants e.g., Driving License/ Utility Bill/ Tenancy Agreement
- Proof of Income for both applicants e.g., Bank statement/ Pay slip/ Universal Credit Statement

Evidence necessary only if relevant to your application form:

- Medical Evidence e.g. Doctors notes, NHS letters, Benefit confirmation
- Eviction Notices
- Children's Birth Certificates
- Proof of Child Benefits – Benefit statement/ Bank statement
- Proof of Carers Allowance
- Proof of property size - Applicable where whole household is moving

As a small housing provider we have a very limited number of properties which are in extremely high demand. Therefore, we are unable to provide emergency housing and it can often be an extensive period of time before an applicant is considered for rehousing. If you are seeking emergency housing we highly encourage you to register with Property Pool Plus alongside your application with us.

Once we have received your application you should expect to receive a notification of receipt detailing the next steps. If you have any questions, or require any support, please do not hesitate to call us on 0151 207 3406.

Yours sincerely

The Eldonian Housing Team

APPLICATION FOR HOUSING

STRICTLY PRIVATE AND CONFIDENTIAL

This application form is for people who are interested in renting a Eldonian Community Based Housing Association property.

If you have any questions when completing this form please call 0151 207 3406.

Completed forms should be returned to:

Eldonian Community Based Housing Association,
The Tony McGann Centre, Eldonian Village, Liverpool, L3 6LG.

Internal reference:

Date received:

Part 1 - Applicant details - please complete each section below, and second applicant details if required:

Is this a joint application? no yes

If **yes**, please enter the second applicant details below ▼

First names:

First names:

Last name:

Last name:

Title e.g. Mr / Mrs / Miss / Ms / other:

Title e.g. Mr / Mrs / Miss / Ms / other:

Date of birth:

Date of birth:

Preferred spoken language:

Preferred spoken language:

Preferred written language:

Preferred written language:

Daytime telephone:

Daytime telephone:

Mobile telephone:

Mobile telephone:

Home telephone:

Home telephone:

Email:

Email:

Please tick the option below which best describes your current residential status. Are you:

- a council tenant a housing association tenant
a private landlord tenant
an owner - occupier
living with family and friends / lodging
currently a Eldonian resident

other (please describe)

Please tick the option below which best describes your current residential status. Are you:

- a council tenant a housing association tenant
a private landlord tenant
an owner - occupier
living with family and friends / lodging
currently a Eldonian resident

other (please describe)

National Insurance number:

National Insurance number:

Please tick the options below which are your preferred methods of contact:

- by telephone by mobile by text
by letter by email

Please tick the options below which are your preferred methods of contact:

- by telephone by mobile by text
by letter by email

Part 2 - Housing history

We need to know where you have been living over the past three years. If you have lived in a rented property then the landlord's details **must** be given in order for us to consider your application. Please be aware that it is necessary for us to contact your previous landlords in order to check your suitability as a Eldonian tenant.

Please complete this section for **both the main applicant and the second applicant** (if there is one). If you need more space please attach a separate sheet.

2A - Current address (please fill in sections 2B and 2C if you have lived at this address for less than three years)

Main applicant details

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

How many bedrooms are there?

How many people live in this property?
(you may need to provide evidence of this)

If you have any outstanding rent or mortgage payments on this or **any** previous properties, please state the **total amount owed** below:

Second applicant details

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

How many bedrooms are there?

How many people live in this property?
(you may need to provide evidence of this)

If you have any outstanding rent or mortgage payments on this or **any** previous properties, please state the **total amount owed** below:

If you are renting a property please provide details of the landlord or letting agent below:

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

2B - Previous address (if less than three years ago)

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

If you were renting this property please provide details of the landlord or letting agent below:

Main applicant details

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

Second applicant details

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

2C - Additional previous address (if less than three years ago)

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

Address:

Postcode:

own lodging renting

How long have you lived at this address? from to

If you were renting this property please provide details of the landlord or letting agent below:

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

Name:

Address:

Postcode:

Telephone:

Reason for leaving rented property:

2D - Evictions or Notice of Seeking Possession

Have you ever been evicted or served with a Notice of Seeking Possession?

yes no if yes, please give details below:

Date served

Have you ever been evicted or served with a Notice of Seeking Possession?

yes no if yes, please give details below:

Date served

Part 3 - Housing requirements

In this section please give details of your current accommodation and the people who will be living with you, if any.

3A - What type of accommodation do you currently occupy?

Main applicant details

house bed & breakfast
 flat hospital
 bungalow care / support home
 prison caravan / mobile home
 /boat

other (please describe)

Second applicant details

house bed & breakfast
 flat hospital
 bungalow care / support home
 prison caravan / mobile home
 /boat

other (please describe)

3B - Please give details of any additional people to be re-housed

If you need to include more people, or there are people living with you now who will not be moving with you, please provide this information in **Part 13**.

Full name

Sex (M/F)

Date of birth

National Insurance number

Relationship to main applicant

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If any of these are children who visit regularly please tell us how many nights per week that you have access in **Part 13**.

3C - If any of the people listed above are not currently living with you please give details below:

Full name

Current address

Reason for living apart

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

3D - Is anyone who is being re-housed expecting a baby, if so please give details below:

Full name

Estimated birth date

Certificate of confinement provided?

<input type="text"/>	<input type="text"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>

If you need to include more information, there is additional space in **Part 13**.

3E - Immigration

Is anyone mentioned on this application form affected by immigration rules? If so please give details:

Full name

Immigration details

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Part 4 - Household income - please provide details for applicants that receive any income:

Main applicant details

Second applicant details

	Main applicant details				Second applicant details			
	Please tick whether the figure you have given is:	Per week	Per fortnight	Per month	Please tick whether the figure you have given is:	Per week	Per fortnight	Per month
Earned income (after deductions)	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State benefits (including state pension)	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private pensions / investment income	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If other, please describe:	<input type="text"/>				<input type="text"/>			

Part 4B - Household outgoings - please provide approximate details of what you spend on your outgoings:

Main applicant details

Second applicant details

	Main applicant details				Second applicant details			
	Please tick whether the figure you have given is:	Per week	Per fortnight	Per month	Please tick whether the figure you have given is:	Per week	Per fortnight	Per month
Current rent / mortgage payments	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility bills (e.g. gas, water, electricity, TV licence)	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loans / credit cards / store cards	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food and household goods	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV subscriptions (e.g. Sky), broadband, internet	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone, mobile	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	£ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If other, please specify:	<input type="text"/>				<input type="text"/>			

Part 5 - Equality and diversity

We are committed to ensuring that all applicants are treated equally and not discriminated against on the grounds of gender, sex, race, marital or civil partner status, gender reassignment, colour, nationality, ethnic or national origin. You are requested to provide the following information to help us improve the services provided to you. However if you do not wish to answer these questions you do not have to do so, and it will not affect your application in any way.

5A - Ethnic background

Main applicant details

White:

British
Irish
other*

Black or Black British:

Caribbean
African
other*

Mixed:

White & Black Caribbean
White & Black African
White & Asian
other*

Asian or Asian British:

Indian
Pakistani
Bangladeshi
other*

Other:

Gypsy / Traveller
Prefer not say
other*

*if other please specify:

Second applicant details

White:

British
Irish
other*

Black or Black British:

Caribbean
African
other*

Mixed:

White & Black Caribbean
White & Black African
White & Asian
other*

Asian or Asian British:

Indian
Pakistani
Bangladeshi
other*

Other:

Gypsy / Traveller
Prefer not say
other*

*if other please specify:

5B - Religion

Buddhist Jewish none
Christian Muslim prefer not to say
Hindu Sikh other

if other,
please specify

Buddhist Jewish none
Christian Muslim prefer not to say
Hindu Sikh other

if other,
please specify

5C - Gender

Male Transgender male to female
Female Transgender female to male
prefer not to say

Male Transgender male to female
Female Transgender female to male
prefer not to say

5D - Sexual orientation

Heterosexual Lesbian / gay woman
Bisexual Gay man
other prefer not to say

Heterosexual Lesbian / gay woman
Bisexual Gay man
other prefer not to say

5E - Health

Please fill in the details below which best represent any health conditions that you or any member of the household may have. Please state who has the condition and their relationship to the main applicant. Please use **Part 13** for additional information if required.

	Who has this condition (full name/s)	Relationship to the main applicant
wheelchair user	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
physical disability	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
deaf or hard of hearing	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
visual impairment	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
acquired visual or hearing impairment	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
long term condition	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
progressive long-term illness	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
mental health problems	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
learning disability	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
difficulties with reading / writing	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
drug / alcohol related condition	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
frail / poor mobility	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
if other, please specify:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

Part 6 - Criminal convictions - Have you or anyone seeking rehousing with you:

- any unspent (see part 12) criminal convictions, court orders or been the subject of an anti-social behaviour order? yes no
- had legal action taken against you because of an anti-social behaviour order or criminal conviction? yes no if yes, please give details below:
- received court orders or have any pending cases in relation to the above? yes no

Full name

Offence details

If you need to include more information, there is additional space in **Part 13**.

Part 7 - Reasons for application - what in your view is the main reason why you want to move?

Main applicant details ▼

- permanently moved from another property owned by Eldonian
- left your home country as a refugee
- property unsuitable because of ill health / disability (please give details in **7B**)
- loss of tied accommodation (your home came with your job)
- end of assured shorthold (fixed term) tenancy
- eviction or repossession
- domestic violence
- non violent relationship breakdown with partner
- asked to leave by family or friends
- racial harassment
- other problems with neighbours
- property unsuitable because of overcrowding (please give details in **7B**)
- discharged from prison or from long stay hospital or other institution
- property unsuitable because of poor condition
- cannot afford rent or mortgage
- to move nearer family / friends / school
- to move nearer work
- to move to accommodation with support (e.g. sheltered housing)
- to move to independent accommodation
- under-occupation
- other (please give details in **7B**)

Second applicant details ▼

- permanently moved from another property owned by Eldonian
- left your home country as a refugee
- property unsuitable because of ill health / disability (please give details in **7B**)
- loss of tied accommodation (your home came with your job)
- end of assured shorthold (fixed term) tenancy
- eviction or repossession
- domestic violence
- non violent relationship breakdown with partner
- asked to leave by family or friends
- racial harassment
- other problems with neighbours
- property unsuitable because of overcrowding (please give details in **7B**)
- discharged from prison or from long stay hospital or other institution
- property unsuitable because of poor condition
- cannot afford rent or mortgage
- to move nearer family / friends / school
- to move nearer work
- to move to accommodation with support (e.g. sheltered housing)
- to move to independent accommodation
- under-occupation
- other (please give details in **7B**)

7B - Reasons for application continued

Please use the space below to tell us in more detail about the reasons why you are moving:

7C - Agency support

Please give details below if you or anyone moving in with you receives support or help from an agency e.g. a support worker:

Who receives support

Contact's name:

Agency:

Address:

Postcode:

Contact's telephone:

Who receives support

Contact's name:

Agency:

Address:

Postcode:

Contact's telephone:

If you need to include more information, there is additional space in **Part 13**.

Part 8 - Where do you want to live?

Please tick the type of accommodation you require: How many bedrooms do you require?

bungalow house flat

In which areas would you like to live?

Please refer to the information enclosed for the areas where we have properties

Within these areas, is there anywhere you would **not** accept a property?

Do you have any special requirements, such as a ground floor flat, scheme manager, sheltered accommodation?

Do you intend to bring a pet with you? yes no If yes, please describe below:

Part 9 - Where did you hear about us?

Please tick all relevant boxes: (you may select more than one)

family / friends for rent board site sign board internet

local authority press advert advice centre other

if other, please specify:

Part 10 - Declaration

It is a criminal offence to knowingly make a false declaration or withhold information reasonably required in connection with your application. Please read the following information and sign if you accept the terms and conditions:

I / we agree that Eldonian can make any enquiries to **confirm** that what I / we have written on this application is true and that Eldonian can take up any references considered necessary in relation to this application. (Please be aware that this may necessitate the disclosure of your current accommodation to your referees).

The information given on this form is a true statement. If I / we are granted a tenancy because I / we have given false or misleading information, or because I / we have not given, or failed to inform Eldonian if my / our circumstances change it is an **offence** and my / our tenancy may be terminated and I / we may have to pay a **fine** of up to £5000 under Section 171 of the 1996 Housing Act. All information that Eldonian holds concerning you as an individual will be held and processed by the organisation strictly in accordance with the provisions of the General Data Protection Regulation (2016/679) and the Data Protection Act (2018). Please read Part 11 - Fair collection statement for more details.

If Eldonian is unable to help you, or you do not reply to any requests for further information, your application will be cancelled and all paperwork will be **confidentially** destroyed.

Also, it is essential in accordance with Eldonian's Code of Governance, that all applicants for housing disclose any relationships with employees or board members of Eldonian. Failure to disclose a relationship with anyone at Eldonian may jeopardise any application that you make and invalidate a reservation made on any property.

Please tick the relevant box below to **confirm** that you are / are not related to, or in a relationship with, anyone within Eldonian and to **confirm** that you have not used, and will not use, any influence in the application process or the reservation of a Regenda home.

Main applicant signature

Print name:

Are you related to or connected to anyone within Eldonian or its associates?

yes

no

If yes, please specify:

Date:

Second applicant signature

Print name:

Are you related to or connected to anyone within Eldonian or its associates?

yes

no

If yes, please specify:

Date:

Part 11 - Fair collection statement

All the information we collect about you is held and processed by Eldonian in accordance with the General Data Protection Regulation (2016/679) and the Data Protection Act (2018); in providing this information you give Eldonian permission to exchange it with other parties to either check it or where we need to share it as part of the activities we undertake, or where we are required to do so by law. We may collect 'sensitive' personal information which includes details around your age, gender, disability, ethnic origin, religion, sexual orientation and medical conditions. We understand that you may not feel comfortable answering some of these questions and

you have the right to refuse to tell us but we need this information to make sure we treat all customers fairly and also because we know that this information may affect your choice of home, the area you want to live in or the services we need to provide to you.

If you have any questions about Data Protection, please contact our:
Data Protection Officer
Eldonian Community Based Housing Association,
The Tony McGann Centre, Eldonian Village, Liverpool, L3 6LG.

Part 12 - Rehabilitation of Offenders Act 1974

Under the Rehabilitation of Offenders Act 1974 after a certain period of time all convictions (except those listed below) become spent. The length of time between the date of conviction and the date it becomes spent depends on the nature of the sentence imposed, the age of the offender at the date of conviction and can be extended by subsequent convictions. Once convictions are spent they need not be disclosed for the purpose of a housing application. We will contact you if we need further information.

*Convictions which can never become spent are those for which a sentence of life imprisonment, a sentence of over two and a half years' imprisonment, detention, youth custody or corrective training was imposed. You must inform us of any further convictions received or pending action prior to being re-housed.

Part 13 - Additional information

Please use this space to give any additional information to support your application. If you are using this space to continue answering a previous question please state clearly the part and question number next to each answer. If you need additional space, please attach a separate sheet to this document.

Part 14 - Check list - before you post this document please check the following:

Nº	TICK ONCE COMPLETE	
1	All Sections Have Been Completed	
2	All Irrelevant Sections Have Been Noted As Not Applicable	
3	Proof of Identity Provided - If Applicable	
4	Proof of Address Provided - If Applicable	
5	Proof of Income Provided - If Applicable	
6	All Medical Evidence Provided - If Applicable	
7	Eviction Notice Provided - If Applicable	
8	Childrens Birth Certificates Provided - If Applicable	
9	Proof of Child Benefits Provided - If Applicable	
10	Proof of Property Size Provided - If Applicable	
11	All parties involved have read and understood the 'fair collection' statement (part 11) in relation to the General Data Protection Regulation (EU 2016/679) and Data Protection Act (2018)	

Part 15 - Eligibility Declaration Check list - Tick all that apply

Nº	TICK ONCE COMPLETE	APPLICANT 1	APPLICANT 2
1	I/ We are over the age of 16		
2	I/ We are not adequately housed		
3	I/ We do not own our own home		
4	I/ We do not have gross annual earnings of £60,000 or more		
5	I/ We do not have savings exceeding £35,000.		
6	I/ We do not hold any Rent arrears/housing-related debt of 8 weeks gross rent or more (net of HB/UC cycles)		
7	I/ We have not been previously evicted from a tenancy with another social landlord.		
8	I/ We have not previously abandoned a tenancy with another social landlord		
9	I/ We have not had a previous ECBHA tenancy with a serious tenancy breach.		
10	I/ We have no history of serious unacceptable behaviour (e.g., anti-social behaviour).		
11	I/ We have no unspent conviction for serious offence that poses a risk to community/staff (e.g., violence, drugs, gang activity, burglary, etc.).		
12	I/ We have no history or conviction for fire starting or arson		

Thank you for applying for a home with Eldonian Community Based Housing Association.

Completed application forms should be returned to:
The Tony McGann Centre, Eldonian Village, Liverpool, L3 6LG

www.eldonians.org.uk