

Application No.

       


# APPLICATION FOR HOUSING

**2 Meiklehill Road, Hillhead, Kirkintilloch, G66 2LA Tel: 0141 578 0200**

**Please read through the form carefully and answer all the relevant questions.**

		Main Applicant	Joint Applicant
<b>First Name</b>			
<b>Surname</b>			
<b>Current Address</b>	<b>No. &amp; Street</b>		
	<b>Area</b>		
	<b>Town/City</b>		
	<b>Postcode</b>		
<b>House Phone</b>			
<b>Mobile Phone</b>			
<b>e-mail address</b>			
<b>Correspondence Address (if different)</b>			

The information in this document is available in other languages or on tape/CD, in large print and also in Braille.

For details contact the Association on 0141 578 0200 or e-mail: [admin@hillheadhousing.org](mailto:admin@hillheadhousing.org)

Tha am fiosrachadh anns an sgrìobhainn seo ri fhaotainn ann an Gàidhlig no air teip/CD, sa chlà mhòr agus cuideachd ann an Clò nan Dall.  
Airson tuilleadh fiosrachaidh, cuiribh fios dhan Chomann air 0141 578 0200 no cuiribh post-dealain gu: [admin@hillheadhousing.org](mailto:admin@hillheadhousing.org)

本文件所載資料備有中文 (廣東話) 版本，也可以製作成錄音帶/光碟，以及利用特大字體和凸字印製，以供索取。  
欲知有關詳情，請聯絡本協會，電話：0141 578 0200，或向我們發送電郵，電郵地址：  
[admin@hillheadhousing.org](mailto:admin@hillheadhousing.org)

इस दस्तावेज़ में दी गई जानकारी हिन्दी में भी या टेप, सी डी, बड़ी छाप और ब्रैल में भी उपलब्ध है। विवरण के लिए एसोसिएशन को नम्बर 0141 578 0200 पर या ई-मेल के द्वारा सम्पर्क करें :  
[admin@hillheadhousing.org](mailto:admin@hillheadhousing.org)

ਇਸ ਦਸਤਾਵੇਜ਼ ਵਿਚ ਦਿੱਤੀ ਗਈ ਜਾਣਕਾਰੀ ਪੰਜਾਬੀ ਵਿੱਚ ਵੀ ਜਾਂ ਟੇਪ, ਸੀ ਡੀ, ਵੱਡੀ ਛਪਾਈ ਅਤੇ ਬ੍ਰੈਲ 'ਤੇ ਵੀ ਉਪਲਬਧ ਹੈ। ਵੇਰਵੇ ਲਈ ਐਸੋਸਿਏਸ਼ਨ ਨੂੰ ਨੰਬਰ 0141 578 0200 'ਤੇ ਜਾਂ ਈ-ਮੇਲ ਰਾਹੀਂ ਸੰਪਰਕ ਕਰੋ :  
[admin@hillheadhousing.org](mailto:admin@hillheadhousing.org)

اس دستاویز میں درج معلومات اردو زبان یا آڈیو ٹیپ / سی ڈی، بڑی طباعت اور بریل میں بھی دستیاب ہیں۔  
تفصیلات کے لئے ایسوسی ایشن سے ٹیلیفون نمبر 0141 578 0200 یا ای میل [admin@hillheadhousing.org](mailto:admin@hillheadhousing.org) کے ذریعے رابطہ قائم کریں۔

**Section A****Your Household/Personal Circumstances:**

**Your Household is everyone who is to be housed with you even if they are not living with you just now.**

- 1** Starting with yourself and any joint applicant, please fill in the table below with details of everyone to be rehoused.

	Name  <i>(please give first name on top line and surname on bottom line in each box – see example below)</i>	Date of Birth			Gender  <i>(tick)</i>			Relation-ship to you  <i>(example: wife, partner, daughter, mother etc.)</i>	National Insurance Number  <i>(if aged 16 or over)</i>	Lives with you now  <i>(tick)</i>		Has a Disability  <i>(tick)</i>	
		Day	Month	Year	Male	Female	Other			Yes	No	Yes	No
	<b>John Smith</b>	<b>01</b>	<b>01</b>	<b>1997</b>	<input checked="" type="checkbox"/>			<b>Son</b>	<b>AA 12 34 56 A</b>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
<b>1</b>								<b>Myself</b>		<input checked="" type="checkbox"/>			
<b>2</b>													
<b>3</b>													
<b>4</b>													
<b>5</b>													
<b>6</b>													
<b>7</b>													
<b>8</b>													

**Is anyone noted above, pregnant? If so, please give the following details:**

The expectant mother's name : \_\_\_\_\_

Expected Date Due : \_\_\_\_\_ The Baby's Gender (if known) : \_\_\_\_\_

***If you need further space for more household members, please attach a note with the additional names and all their details as above.***

**2** Does the following apply to anyone on this application ? Please tick "Yes" or "No" to each statement in (a) to (d) below.

- | <b>(a) Immigration or Asylum Seekers</b>                                    | <b>Yes</b>               | <b>No</b>                |
|---|--------------------------|--------------------------|
| They are an Immigrant or Asylum Seeker                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| They have a restriction on access to public funds                           | <input type="checkbox"/> | <input type="checkbox"/> |
| They <u>do not</u> have indefinite or exceptional leave to remain in the UK | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered "Yes" to any of the above, please give the person(s) name(s)

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(Please refer to **Section E** **1** on Page 14 for guidance on further information required)

- | <b>(b) Sex Offender</b>            | <b>Yes</b>               | <b>No</b>                |
|------------------------------------|--------------------------|--------------------------|
| They are a registered Sex Offender | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered "Yes", what is their name : \_\_\_\_\_

- | <b>(c) Has a tenancy now or in the past 5 years where :</b>  | <b>Yes</b>               | <b>No</b>                |
|--|--------------------------|--------------------------|
| <b>(i)</b> They had court action taken against them for anti-social behaviour: or an ASBO granted against them | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>(ii)</b> They had had a warning from a landlord about anti-social behaviour                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>(iii)</b> They were taken to Court or Evicted for rent arrears  | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>(iv)</b> They gave up or abandoned their tenancy leaving rent arrears                                       | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered "Yes" to any of the above, please give the name(s) of the person(s) : \_\_\_\_\_

The address(es) of the tenancy(ies) : \_\_\_\_\_

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The name(s) and address(es) of the Landlord(s) : \_\_\_\_\_

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- | <b>(d) Is the owner of a property at present ?</b> | <b>Yes</b>               | <b>No</b>                |
|--|--------------------------|--------------------------|
|  | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered "Yes", what is/are their name(s) : \_\_\_\_\_

What is the address of the property they own? : \_\_\_\_\_

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3

For people noted in the Table on Page 2 as not living with you now, but are to be rehoused with you, please give the following details :

**Person 1.** Their Name : \_\_\_\_\_

Where do they live now ? \_\_\_\_\_

Why do they not live with you? \_\_\_\_\_

**Person 2.** Their Name : \_\_\_\_\_

Where do they live now ? \_\_\_\_\_

Why do they not live with you? \_\_\_\_\_

**Person 3.** Their Name : \_\_\_\_\_

Where do they live now ? \_\_\_\_\_

Why do they not live with you? \_\_\_\_\_

**Person 4.** Their Name : \_\_\_\_\_

Where do they live now ? \_\_\_\_\_

Why do they not live with you? \_\_\_\_\_

**Person 5.** Their Name : \_\_\_\_\_

Where do they live now ? \_\_\_\_\_

Why do they not live with you? \_\_\_\_\_

*If any of the people given above are a child or children for whom you share access with a former partner, you can only be certain of being considered for additional bedroom(s) to accommodate them if you are their main guardian.*

*If you are not the child or children's main guardian, you are less likely to be considered for additional bedroom(s) however this will depend on demand for the type of properties you have asked for.*

(Please refer to **Section E** **8** on Page 15 for guidance on further information required)

**Section B****Your Present Housing Circumstances****1** Please tick whichever applies to you :

- (a) I am an Owner Occupier
- (b) I am a Tenant of a Housing Association or Council
- (c) I am a Tenant of a Private Landlord
- (d) I live with Parents/Other Relatives/Friends
- (e) I live in Supported Accommodation
- (f) I am Homeless and sleeping rough *(If you haven't already done so, you should contact East Dunbartonshire Council on 0300 1234510). (Now please go straight to Question 12)*
- (g) I am Homeless and living in temporary accommodation provided by the Council, a Housing Association or a Charity
- (h) I am Homeless and living between two or more addresses *(If you haven't already done so, you should contact East Dunbartonshire Council on 0300 1234510). (Now please go straight to Question 9)*
- (i) I live in a Tied House which is provided with my job
- (j) None of the above : *(please describe)* : \_\_\_\_\_

**2** Please tick the type of property you live in just now? *(if you have ticked (f) or (h) above, you do not need to answer this Question or Questions 3 to 8)*

- (a) Tenement Flat *(in a close)*
- (b) Maisonette Flat *(usually entered from an outside corridor)*
- (c) High Rise Flat *(otherwise known as a multi-storey flat)*
- (d) Main Door Flat *(includes 4-in-block cottage flats)*
- (e) Bedsit or converted flat in a larger property
- (f) Bungalow *(a house with no upstairs)*
- (g) House *(with upstairs and downstairs)*
- (h) Hostel, hotel, hospital, prison, care home, other institution
- (i) Caravan
- (j) Other type of property *(please describe)* \_\_\_\_\_

Yes    No

Do you have your own garden area which is not shared with neighbours ?

If you live in a flat, on what floor level is your own front door ?

Ground     1<sup>st</sup>     2<sup>nd</sup>     3<sup>rd</sup>     Above 3<sup>rd</sup>

**3** How many bedrooms **in total** are in your present accommodation :

Double Bedrooms : \_\_\_\_\_ Single Bedrooms : \_\_\_\_\_

If you are living in someone else's house, how many bedrooms do you and your household *(as noted in the Table on Page 2)* have for your own use which **are not** shared with others who **are not** part of your household?

Double Bedrooms : \_\_\_\_\_ Single Bedrooms : \_\_\_\_\_

**4** If you are a Tenant *(of a Council, a Housing Association or a Private Landlord)*, please give the name and address of your Landlord : \_\_\_\_\_

\_\_\_\_\_

**5** If you live in a Tied House, please give your employer's name & address : \_\_\_\_\_

\_\_\_\_\_

*(Please refer to **Section E** **3** on Page 14 for guidance on further information required)*

**6** If you are an Owner Occupier, please tell us why you would not be able to buy a suitable house for your needs : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7** If you have been asked to leave your present accommodation, by what date must you leave : \_\_\_\_/\_\_\_\_/20\_\_\_\_

*(Please refer to **Section E** **2** on Page 14 for guidance on further information required)*

8

**You only need to answer this question if you live with Parents, Relatives or Friends.**

If not please go directly to **Question 10** unless you are homeless and living between two or more addresses, in which case please go to **Question 9**

So that we can calculate whether you are overcrowded, we need to know about everyone who lives with you but is **not** being rehoused with you. (**No-one included in the Table on Page 2 should be noted here**).

**Everyone noted below needs to give their consent for this, therefore if they are over 16, please ask them to sign the right hand column against their name. If they're under 16, please ask their parent/carer to sign.**

*If you cannot obtain consent, either because you want to keep your application confidential; or because consent has been refused, we may have to make assumptions about whether you are overcrowded or not.*

	Name	Age	Gender (tick)			Their Relationship to you (for example: wife, partner, daughter, mother etc.)	Their signature (or if under 16, parent's/carer's signature)
			Male	Female	Other		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

- 9** If you are homeless and living between two or more addresses, please give details below :

**Address No. 1 :** \_\_\_\_\_

Name of the Householder : \_\_\_\_\_

Reason for having to leave : \_\_\_\_\_

**Address No. 2 :** \_\_\_\_\_

Name of the Householder : \_\_\_\_\_

Reason for having to leave : \_\_\_\_\_

**Address No. 3 :** \_\_\_\_\_

Name of the Householder : \_\_\_\_\_

Reason for having to leave : \_\_\_\_\_

(Please refer to **Section E** **7** on Page 15 for guidance on further information required)

- 10** Do you have the following in your present accommodation? *You should tick "Shared" if you share these facilities with people who are not going to be rehoused with you.*

	<b>Yes</b>	<b>No</b>	<b>Shared</b>		<b>Yes</b>	<b>No</b>	<b>Shared</b>
<b>Living Room</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Inside Toilet</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Kitchen</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Bath/Shower</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Garden area</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Adequate Hot Water</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 11** Does your accommodation suffer from any of the following :

	<b>Yes</b>	<b>No</b>
Rising dampness; dry or wet rot; or woodworm	<input type="checkbox"/>	<input type="checkbox"/>
Severe condensation dampness	<input type="checkbox"/>	<input type="checkbox"/>
Severe structural faults	<input type="checkbox"/>	<input type="checkbox"/>
Water penetrating into property from outside	<input type="checkbox"/>	<input type="checkbox"/>

(Please refer to **Section E** **6** on Page 14 for guidance on further information required)



**12** Why do you wish to be rehoused? *(please tick all that apply).*

Need a larger House	<input type="checkbox"/>	Want to live independently	<input type="checkbox"/>
Need a smaller House	<input type="checkbox"/>	Relationship breakdown	<input type="checkbox"/>
Cannot manage Stairs	<input type="checkbox"/>	Suffering from Harassment	<input type="checkbox"/>
Need to be nearer Job	<input type="checkbox"/>	Condition of present Property	<input type="checkbox"/>
Disability or Health reasons	<input type="checkbox"/>	Would Like a Better Property	<input type="checkbox"/>
Would like a Garden	<input type="checkbox"/>	Would like a smaller or no Garden	<input type="checkbox"/>
Crime/vandalism in area	<input type="checkbox"/>	Would like a Better Environment	<input type="checkbox"/>
I am/we are Homeless	<input type="checkbox"/>	Other <i>(please explain)</i> :	_____

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**13** Do you need to move to Hillhead to: *(please tick "Yes" or "No" to each question)*

	Yes	No
(a) Provide help and support to someone living in the area	<input type="checkbox"/>	<input type="checkbox"/>
(b) Receive help and support from someone living in the area	<input type="checkbox"/>	<input type="checkbox"/>
(c) Be nearer to work or an essential facility in the area	<input type="checkbox"/>	<input type="checkbox"/>

If you have ticked **"Yes"** to **(a)** or **(b)**, we will send you a further form to complete.

If you have ticked **"Yes"** to **(c)**, please refer to **Section E 4** or **5** on page 14 for further information you will need to provide to us.

***Please note : generally you must live 5 miles or more away from Hillhead to be considered for extra points.***

**14** Does anyone in your household *(including you)*, have a disability or health problem which could be improved or managed better, by a move of home?

Yes  No

If you've ticked the **"Yes"** box, we will send you a further form to complete.

**15** Does anyone in your household have any pets ? Yes  No

*(do not include fish, birds and small animals which are always kept in cages in the house)*

If you have answered “Yes”, please tell us how many and what they are :

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**16** Starting **with your present address and working backwards**, please tell us where you have lived over the past 5 years.

*In the column headed “Tenure” please insert the appropriate code (a) to (l) from the list of codes on Page 11, against each address. If you need space for more addresses, please continue on a blank sheet of paper.*

*If there is a joint applicant, unless they have lived at the same address with you for 5 years or more, they should complete their information in the table on Page 11.*

<b>Main Applicant</b>		<i>This table should be completed in all cases. Remember to put in your present address in line 1. See the example given below. If you were homeless and sleeping rough, or living between two or more friends/relatives, you do not need to give Address or Landlord details but should give approximate dates in the “From” and “To” columns and the appropriate code in the “Tenure” Column</i>				
No	Address	Time There		Tenure (See Codes a. to l. on Page 11)	Reasons for leaving	If you were the Tenant of the Property, please give your Landlord’s Name & Address
		From	To			
	<b>1 Any Street, Any Town, G99 1ZZ</b>	<b>June 1995</b>	<b>Present Date</b>	<b>b</b>	<b>House is too small</b>	<b>Any Council, Council Buildings, Anywhere</b>
1						
2						
3						
4						
5						

**Tenure Codes** – *Please use these codes for each property you have listed in the Table below and the Table on Page 10*

- (a) I am or was an Owner Occupier
- (b) I am or was a Tenant of a Housing Association or Council
- (c) I am or was a Tenant of a Private Landlord
- (d) I am or was living with Parents/Other Relatives/Friends
- (e) I am or was living in Supported Accommodation
- (f) I am or was Homeless and sleeping rough
- (g) I am or was Homeless and living in temporary accommodation provided by the Council, a Housing Association or a Charity
- (h) I am or was Homeless and living between several Relatives/Friends
- (i) I am or was living in a Tied House which is provided with my job
- (j) I am or was living in a Hospital/Prison/Care Home/Other Institution
- (k) I am or was living in a Caravan
- (l) None of the above (*please describe*) : \_\_\_\_\_

No		Address	Time There		Tenure (See Codes a. to l. above)	Reasons for leaving	If you were the Tenant of the Property, please give your Landlord's Name & Address
			From	To			
		<b>1 My Street, My Town, G99 1ZZ</b>	<b>June 1995</b>	<b>Present Date</b>	<b>c</b>	<b>Need ground floor property</b>	<b>Lettings Agency Ltd, My Town</b>
1							
2							
3							
4							
5							

**Section C****Your Housing Needs/Preferences****1 Please tick the house types you wish to be considered for.**

In order to have the best chance of being made an offer of housing, you should either tick **“Any Type of Property”** or as many house types as possible. *Please note that you will only be considered for property types which you have ticked.*

Any type of Property

Tenement Flat - ground floor	<input type="checkbox"/>	4-in-a-block Lower Cottage Flat	<input type="checkbox"/>
Tenement Flat – 1 <sup>st</sup> floor	<input type="checkbox"/>	4-in-a-block Upper Cottage Flat	<input type="checkbox"/>
Tenement Flat – 2 <sup>nd</sup> floor	<input type="checkbox"/>	Bungalow (all rooms at ground level)	<input type="checkbox"/>
Main door Flat – ground floor	<input type="checkbox"/>	House (rooms on two or more levels)	<input type="checkbox"/>
Main door Flat – upper floor	<input type="checkbox"/>	House with a bedroom & bathroom at ground level ( <i>suitable for someone with mobility difficulties</i> )	<input type="checkbox"/>

**2 We will usually decide the number of bedrooms you need, based on your household, but if you need an additional bedroom, please tell us why** (*for example because you need to have a carer staying overnight; or because someone who would normally be expected to share a bedroom has a disability or health problem which would make this difficult* . *Please note that you may be asked to provide evidence before we consider this*). \_\_\_\_\_

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**3 Do you have any of the following particular needs or wishes** (*please tick all that apply, but please note that you will not be considered for properties which do not meet the needs or wishes you have ticked*) :

No stairs inside house	<input type="checkbox"/>	No steps to front door	<input type="checkbox"/>	Private Garden	<input type="checkbox"/>
Few steps to front door	<input type="checkbox"/>	Level access shower	<input type="checkbox"/>	Downstairs bedroom	<input type="checkbox"/>
Downstairs bathroom	<input type="checkbox"/>	Fully wheelchair adapted inside and outside	<input type="checkbox"/>		
Wheelchair accessible to front door but not necessarily fully adapted inside	<input type="checkbox"/>				
Suitable for being adapted for wheelchair access	<input type="checkbox"/>				
Suitable for being fully adapted to wheelchair standards	<input type="checkbox"/>				
Any other needs or wishes ? ( <i>please describe</i> )	_____				

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- 4** Tell us what streets you want to be considered for. *Please note: unless you have ticked the “Any Street in Hillhead” box, you will only be considered for the streets you have ticked.*

In the future, Hillhead Housing Association may have properties in other areas of Kirkintilloch. If you would like to be considered for these, please tick the “Other Areas in Kirkintilloch” box.

Any Street in Hillhead <input type="checkbox"/>		Other areas in Kirkintilloch <input type="checkbox"/>	
Abbotsford Drive	<input type="checkbox"/>	Highfield Court	<input type="checkbox"/>
Banks Road	<input type="checkbox"/>	Highfield Crescent	<input type="checkbox"/>
Blackdyke Road	<input type="checkbox"/>	Highfield Grove	<input type="checkbox"/>
Border Way	<input type="checkbox"/>	Highfield Road	<input type="checkbox"/>
Cleddans Road	<input type="checkbox"/>	Hillhead Road	<input type="checkbox"/>
Conway Court	<input type="checkbox"/>	Ivanhoe Drive	<input type="checkbox"/>
Crossgates	<input type="checkbox"/>	John Street	<input type="checkbox"/>
Eastside	<input type="checkbox"/>	Kenilworth Road	<input type="checkbox"/>
Eildon Road	<input type="checkbox"/>	Kilsyth Road	<input type="checkbox"/>
Fernlea Road	<input type="checkbox"/>	Lammermoor Road	<input type="checkbox"/>
Friarscroft	<input type="checkbox"/>	Langmuir Road	<input type="checkbox"/>
Hardmuir Gdns	<input type="checkbox"/>	Lily Gardens	<input type="checkbox"/>
Hardmuir Road	<input type="checkbox"/>	Marmion Drive	<input type="checkbox"/>
Highfield Avenue	<input type="checkbox"/>	McFarlane Place	<input type="checkbox"/>
		Meiklehill Avenue	<input type="checkbox"/>
		Meiklehill Road	<input type="checkbox"/>
		Mitchell Gardens	<input type="checkbox"/>
		Newdyke Avenue	<input type="checkbox"/>
		Newdyke Road	<input type="checkbox"/>
		Redbrae Place	<input type="checkbox"/>
		Redbrae Road	<input type="checkbox"/>
		Rosebank Avenue	<input type="checkbox"/>
		Shells Road	<input type="checkbox"/>
		Waterloo Gardens	<input type="checkbox"/>
		Waverley Crescent	<input type="checkbox"/>
		Whitehill Avenue	<input type="checkbox"/>
		Whitehill Crescent	<input type="checkbox"/>
		Woodstock Ave	<input type="checkbox"/>

## **5** Alternative Tenures

As well as social rented housing, at some point in the in future, the Association may wish to provide other types of tenures.

If you would like to find out more about these when and if the Association decides to offer them, please tick those which may be of interest to you.

*Alternatively, if you would like more information on what these are before you decide whether to tick any of them, please contact the Housing Manager.*

Shared Ownership     Shared Equity     Mid Market Rent

## **Section D** *Relatives of Committee or Staff Members*

Are you, or anyone in your household, related to a member of the Association's Management Committee or staff. (*Relationships include relatives of your partner and your children*) **Yes**  **No**

If you have answered "Yes", who is the person you or the member of your household is related to \_\_\_\_\_

*If you have answered "Yes", this will only affect your application at the point of being considered for an offer of housing when the Management Committee must be satisfied that it is being made within the general allocation rules of the Association; and that the applicant received no more favourable treatment when compared with other applicants.*

## **Section E** *Other Information You Should Provide with your Application*

**1** **Immigrants and Asylum Seekers** : *documentation associated with the application for; and granting of leave to remain.*

**2** **Being asked to leave present accommodation** : *written confirmation from your present Landlord or Householder of the date you have to leave and the reasons.*

**3** **Leaving Tied housing** : *If you are leaving your employment and therefore losing the tied house, we need your employer to confirm that you have been living in a tied house and have not been dismissed for misconduct.*

*If you are remaining in your job but the tied house is no longer available to you, we need written confirmation of this and the reasons, from your employer.*

**4** **Moving for job reasons** : *written confirmation of your employment from your employer.*

**5** **Moving to be nearer an essential facility** : *written confirmation of the need to move nearer the facility from Health, Education or Social Work professionals. You should note that the facility must be more than five miles from where you live, or you have exceptional difficulty getting to the facility; and the facility must be in East Dunbartonshire.*

**6** **Poor condition of current property** : *written confirmation from Environmental Health or Building Control.*

- 7** **Proof of staying with relatives/friends at more than one address** : *written confirmation from the householders at each address, that you have been living there; and if you have been asked to leave, the date you must leave by and the reason.*
- 8** **Proof of custody or access arrangements for a child or children** : *if you are the child or children's main guardian, you will need proof of child benefit payments being made to you; or a Court Order; or a letter from a solicitor or Social Worker confirming that you are the main guardian.*
- If you are not the child or children's main guardian, you will need a Court Order, a letter from a solicitor, Social Worker or a letter from the main guardian setting out the access arrangements ie. how many overnight stays the child or children will be spending with you each week.*

## **Section F** **General Data Protection Regulations Statement**

- 1** The information you provide on this form will be processed in accordance with the General Data Protection Regulations 2018. It will be used for the purpose of administering your housing application and any future tenancy, including the recovery of rent arrears and other charges.
- 2** The information may also be shared with Police, Health & Social Work Services, East Dunbartonshire Council; other Social Landlords and utility suppliers in respect of protection of vulnerable persons; establishing and verifying needs; detecting and preventing fraud and other crimes; and recovering arrears and other charges.
- 3** The information may be shared with Credit Reference agencies to establish your credit history. A poor report will not necessarily affect your application however, any offer of housing may be subject to you agreeing to accept support to assist you in managing your income and ensuring that rent and other charges are paid.

**Section G*****Declaration - Please read carefully and only sign if you agree with all aspects of this Declaration.***

- 1** I/We consent to the Association using the information I/we have provided on this form, in accordance with the General Data Protection Regulations Statement in Section F on Page 15.
- 2** I/We consent to the Association making enquiries as necessary with the agencies specified in the General Data Protection Regulations Statement in Section F on Page 15.
- 3** I/We consent to the Association giving information relating to this application as necessary to the agencies specified in the General Data Protection Regulations Statement in Statement F on Page 15.
- 4** I/We understand that if I/we give information that is incorrect, incomplete, or fail to report any change in circumstances which affect the application for housing, I/we may have the application suspended for a period not to exceed one year.
- 5** I/We understand that if a tenancy is granted on the basis of incomplete, false or misleading information by me/us, that the Association can instigate proceedings to recover possession of the property and that I/we may be prosecuted.
- 6** I/We understand that the completion of this form does not constitute a binding agreement on the Association to make an offer of housing to you.

**I/We understand and agree to the contents of 1 – 6 above.**

**Main Applicant's**

**Signature :** \_\_\_\_\_ **Date :** \_\_\_/\_\_\_/20\_\_\_

**Joint Applicant's**

**Signature :** \_\_\_\_\_ **Date :** \_\_\_/\_\_\_/20\_\_\_



## Equal Opportunities

Please note that this section will be removed from your application form immediately upon receipt and only used for statistical purposes.

Hillhead Housing Association is committed to equal opportunities. This means that we aim to ensure that no housing applicant is treated any less favourably than any other because of their race, skin colour, nationality, religion, ethnic or national origin; disability, gender, sexuality or age. In order to monitor this, we would ask you to tick the description in each section which you and any joint applicant consider best describes each of you.

If you choose not divulge any of the information, there is the option of ticking the “I prefer not to say” option in each section.

### 1 ETHNIC ORIGIN - *what ethnic origin do you and any joint applicant consider yourselves to be?*

		Main Applicant	Joint Applicant
1. White	a. Scottish		
	b. Other British		
	c. Irish		
	d. Gypsy/Traveller		
	e. Polish		
	f. Any other White background		
2. Mixed or Multiple Ethnic Groups			
3. Asian, Asian Scottish, Asian British	a. Indian		
	b. Pakistani		
	c. Bangladeshi		
	d. Chinese		
	e. Any other Asian background		
4. Black, Black Scottish, Black British	a. Caribbean		
	b. African		
	c. Any other Black background		
5. Other ethnicity	a. Arab, Arab Scottish, Arab British		
	b. Any other group		
6.	Unknown background		
7.	I prefer not to say		

- 2** **DISABILITY** - *do you and any joint applicant consider yourselves have a disability?*

	Main Applicant	Joint Applicant
Yes		
No		
I prefer not to say		

- 3** **RELIGION** – *please indicate whether you and any joint applicant practice or adhere to any of the following religions; or whether you have no religious beliefs?*

	Main Applicant	Joint Applicant
Christianity		
Islam		
Hinduism		
Sikhism		
Judaism		
Buddism		
Other Religion		
No Religion		
I prefer not to say		

**Please check that you have completed all the relevant information on Pages 1 to 18 and then return the whole form to Hillhead Housing Association, 2 Meiklehill Road, Hillhead, Kirkintilloch, G66 2LA.**



