



**APPLICATION FOR HOUSING –
 Shared Ownership**

Scheme Name: _____

1. YOU AND YOUR HOUSEHOLD		
	APPLICANT	JOINT APPLICANT (if applicable)
Title (Mr/Mrs/Ms/Other)		
First Name		
Surname		
Date of Birth		
Address		
Home Telephone Number		
Works Telephone Number		
Mobile Number		
Email Address		
National Insurance Number		
Nationality		

Who else will be living with you other than the applicant and joint applicant?	Name	Relationship	Date of Birth
1.			
2.			
3.			
4.			

2. YOUR CURRENT HOUSING CIRCUMSTANCES		
	APPLICANT	JOINT APPLICANT (if applicable)
Are you: A Council Tenant		
A Housing Association Tenant		
Living with Family or Friends		
Renting Privately		
A previous Home Owner		
A current Home Owner		
Other		
How long have you lived at your Present address		
If you have lived there for less than 3 Years, please supply us with your previous address(es) and indicate how long you lived at each address(es)		

3. EMPLOYERS DETAILS		
	APPLICANT	JOINT APPLICANT (if applicable)
Employer's Name		
Occupation		
Employment Status (Permanent, Fixed Contract etc.)		
Employers Address		
Employers Telephone Number		
Start Date		

4. INCOME DETAILS (Please provide monthly figures)		
	APPLICANT	JOINT APPLICANT (if applicable)
Gross income (before deductions)	£	£
Basic income (after deductions)	£	£
Regular overtime/commission	£	£
Maintenance received	£	£
Child/Working Tax Credit	£	£
Child Benefit	£	£
State/Work Pension	£	£
Income Support	£	£
Other (please state)	£	£

Please supply copies of your previous 3 months wages slips. We will ask your employer to verify your salary/wages and other details. We will also require confirmation of all benefits you receive.

5. SAVINGS DETAILS		
	APPLICANT	JOINT APPLICANT (if applicable)
How much savings do you have?	£	£
Other Assets	£	£

Please supply evidence of all savings.

Do you receive Housing Benefit

Yes

No

Do you have any outstanding loans/regular payments (including credit card debts) as at today's date ?

Please confirm type of loan(s) and amount(s) outstanding

How much do you currently pay monthly in rent or mortgage?

6. FINANCIAL COMMITMENTS/OUTGOINGS Please provide monthly figures		
	APPLICANT	JOINT APPLICANT (if applicable)
Childcare and/or Maintenance	£	£
Hire Purchase/Loans	£	£
Credit Cards	£	£
Other (please state)	£	£

7. IN ORDER TO ASSESS YOUR APPLICATION PLEASE INDICATE WHICH OF THE FOLLOWING APPLIES TO YOU (please tick)	
(1) Are you unable to buy the type of property you need outright? <input type="checkbox"/>	(6) Are you moving to support or be close to relatives <input type="checkbox"/>
(2) Are you a First Time Buyer <input type="checkbox"/>	(7) Are you a Keyworker eg. (Teacher or Nurse) <input type="checkbox"/>
(3) Do you suffer from Ill Health or any Disability <input type="checkbox"/>	(8) Can you obtain a mortgage to cover the cost of purchasing at least 25% of the property? <input type="checkbox"/>
(4) Are you moving because of a Relationship Breakdown <input type="checkbox"/>	(9) Do you have a County Court Judgment registered against you or defaulted on a loan in the last 6 years? <input type="checkbox"/>
(5) Are you moving because of Racial/Other Harassment <input type="checkbox"/>	(10) Do you have arrears on your rent or mortgage account? <input type="checkbox"/>

Please provide any supplementary information to support your application

8. REFERENCES APPLICANT**Reference 1**

Name

Address

Telephone Number

Relationship To You

Reference 2

Name

Address

Telephone Number

Relationship To You

8. REFERENCES JOINT APPLICANT**Reference 1**

Name

Address

Telephone Number

Relationship To You

Reference 2

Name

Address

Telephone Number

Relationship To You

References should be from your Employer and your Landlord if you are currently renting a property.

9. EQUAL OPPORTUNITIES & ETHNIC MONITORING

Applications are invited from anyone irrespective of marital status, sex, colour, ethnic or national origin, race, religion, disability or age.

Arcon Housing Association Ltd operates an Equal Opportunities Policy and in order to assess the effectiveness of our policy we monitor the ethnic origin of housing applicants.

You are not obliged to fill in this section and it will not influence our decision but we would be grateful for your co-operation.

How would you describe your ethnic origin? Please tick one box (A = Applicant JA = Joint Applicant)

<input type="checkbox"/>	<input type="checkbox"/>	White-British	<input type="checkbox"/>	<input type="checkbox"/>	Mixed-White & Asian	<input type="checkbox"/>	<input type="checkbox"/>	Black/Black British:Caribbean
<input type="checkbox"/>	<input type="checkbox"/>	White-Irish	<input type="checkbox"/>	<input type="checkbox"/>	Mixed – Other	<input type="checkbox"/>	<input type="checkbox"/>	Black/Black British: African
<input type="checkbox"/>	<input type="checkbox"/>	White-Other	<input type="checkbox"/>	<input type="checkbox"/>	Asian/Asian British:Indian	<input type="checkbox"/>	<input type="checkbox"/>	Black/Black British:Other
<input type="checkbox"/>	<input type="checkbox"/>	Mixed-White & Black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>	Asian/Asian British:Pakistani	<input type="checkbox"/>	<input type="checkbox"/>	Chinese/other ethnic group:Chinese
<input type="checkbox"/>	<input type="checkbox"/>	Mixed-White & Black African	<input type="checkbox"/>	<input type="checkbox"/>	Asian/Asian British: Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>	Chinese/other ethnic group:other
			<input type="checkbox"/>	<input type="checkbox"/>	Asian/Asian British:Other	<input type="checkbox"/>	<input type="checkbox"/>	Refused

10. DATA PROTECTION ACT 1998

In order to proceed with your application for housing, Arcon Housing Association is required under the Data Protection Act 1998 (The Act) to obtain your consent to process the data you have supplied on this form. Arcon Housing Association has policies in place to ensure that data is processed and held in accordance with the Act and remains confidential where appropriate.

Details regarding Ethnic Origin and medical condition are regarded as being sensitive data under the Act and express consent is required for this data to be processed.

Ethnic Origin data is used by Arcon Housing Association to monitor its Equal Opportunities policy in respect of lettings and to meet the requirements of the Housing Corporation. All data is aggregated and individual applicants are not identifiable.

By signing the Application form below Arcon Housing Association recognises that you are consenting to us processing general information about yourself as well as data concerning your ethnic origin and medical history/health.

11. NATIONAL FRAUD INITIATIVE

Arcon Housing Association participates in the National Fraud Initiative Data Matching exercise. This is required under Section 6 of the Audit Commission Act 1998. Tenancy Data (including Housing Benefit claim information) is provided to the Audit Commission for the initiative and is used for cross-system and cross-authority comparison for the prevention and detection of fraud.

12. STATEMENT

The above information I have given is true and complete and I consent to Arcon processing my application for housing form. I understand that Arcon Housing Association Ltd will carry out checks to ensure that the information provided is accurate and I give them permission to do so. I am aware that if false information is given it may result in my application being disqualified.

Signed
(Applicant)

Date

Signed
(Joint Applicant)

Date

