****

200 Crown Street, Glasgow G5 9XT

Tel: 0141 429 3900, Fax: 0141 429 3782

Email: admin@newgorbalsha.org.uk

**SUBSIDIARY**

**OFFICIAL USE ONLY**

Reference No:

Date received:

**Mid-Market Housing Application Form**

If you have any difficulty with sight or hearing, or if you need this form in a different format or language,

please let us know and we will provide the information in a form that suits your needs. Alternatively we can

provide an interpreter to assist you with completing the form, or our staff may also be able to help you.

**Please complete all sections, sign the declaration in section 7 and return electronically to** [**mmr@newgorbalspm.co.uk**](mailto:mmr@newgorbalspm.co.uk)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **What property are you interested in?** | | | | | | |
|  | | | | | | |
|  | | | | | | |
|  | | | | | | |
|  | | | | | | |
| 1. **Name and Address** | | | | | | |
| First Applicant | | |  | Joint Applicant | | |
| Title  (Mr, Mrs, Miss etc) |  | | Title  (Mr, Mrs, Miss etc) |  | |
| Surname |  | | Surname |  | |
| First Name |  | | First Name |  | |
| Address  (please  indicate if c/o) |  | | Address  (please  indicate if c/o) |  | |
| Floor Level / Flat no | |  | Floor Level / Flat no | |  |
| Postcode | |  | Postcode | |  |
| Telephone (Day) | |  | Telephone (Day) | |  |
| (Eve) | |  | (Eve) | |  |
| (Mobile) | |  | (Mobile) | |  |
| National Insurance Number | |  |  | National Insurance Number | |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. **Where do you live at present** | | | | | | | | |
| 1. Please give details of your current accommodation. Are you? | | | | | | | | |
| A Council or Housing Association Tenant | | | | Living with parent(s) | | | | |
| A Private Landlord Tenant | | | | Living care of friends / relatives | | | | |
| An Owner Occupier | | | | Homeless / No fixed abode | | | | |
| A Shared Owner | | | | Living in temporary or hostel accommodation | | | | |
| In HM Forces Accommodation | | | | Living in a Caravan | | | | |
| 1. How long have you lived at this address? | | | | Years       Months | | | | |
| 1. Please give the contact details and address of your landlord | | | | Name:  Address:  Postcode:  Telephone:  Email: | | | | |
| 1. Please list below **everyone** who will be living with you in any accommodation offered, starting with yourself. | | | | | | | | |
| Surname | First Name | | Mr/Mrs/Ms/Miss | Date of Birth | | Relationship  to you | | **Not** moving with me |
|  |  | |  |  | | *Myself* | |  |
|  |  | |  |  | |  | |  |
|  |  | |  |  | |  | |  |
|  |  | |  |  | |  | |  |
|  |  | |  |  | |  | |  |
|  |  | |  |  | |  | |  |
|  |  | |  |  | |  | |  |
| 1. **Previous Addresses** | | | | | | | | |
| Please give details of the last three addresses you lived at, before moving to your present address. | | | | | | | | |
| Address  (include flat no.) | | Landlord  (Name and Address) | | | Date  From To | | Reason for Leaving | |
|  | |  | | |  | |  | |
|  | |  | | |  | |  | |
|  | |  | | |  | |  | |

|  |  |  |
| --- | --- | --- |
| 1. **Employment and Financial Details** | | |
| Employment Details | Self | Joint Applicant |
| Name of Employer |  |  |
| Address |  |  |
|  |  |  |
|  |  |  |
| Income Details |  |  |
| Gross Annual Salary |  |  |
| Net Monthly Income |  |  |
| Other Income (including overtime, bonuses, tax credits, child benefits, pension, universal credit, housing benefit etc) |  |  |
| Savings |  |  |
| Expenditure Details |  |  |
| Rent/Mortgage |  |  |
| Loans |  |  |
| Other |  |  |

|  |  |
| --- | --- |
| 1. Reason For Application | |
| 1. Why are you applying for a new home? | |
| Current home too expensive | To live independently |
| Overcrowding/Under Occupying | Relationship breakdown |
| Health or disability | Other (please say below) |
| Other Reason for applying | |

|  |
| --- |
| Is there anything else you would like to tell us in support of your application – please fill in section below |
|  |

|  |
| --- |
| 1. **Ethnic Origin / Disability** |

Please answer this question to provide the **SUBSIDIARY** with statistics, which can be monitored to ensure that no group is being discriminated against. This information is used for statistical purposes only and will not influence how your application is dealt with in any way.

Please tick one box for yourself and one for your partner, if appropriate.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First Applicant | |  | Joint Applicant | |
| **A** | White |  | A | White |
|  | Scottish |  |  | Scottish |
|  | Other British |  |  | Other British |
|  | Gypsy / traveller |  |  | Gypsy / traveller |
|  | Polish |  |  | Polish |
|  | Irish |  |  | Irish |
|  |  |  |  |  |
|  | Any other White background, please write in |  |  | Any other White background, please write in |
|  |  |  |  |  |
|  |  |  |  |  |
| B | Mixed or multiple ethnic background |  | B | Mixed |
|  | Any Mixed background, please write in |  |  | Any Mixed background, please write in |
|  |  |  |  |  |
|  |  |  |  |  |
| C | Asian, Asian Scottish, or Asian British |  | C | Asian, Asian Scottish or Asian British |
|  | Indian |  |  | Indian |
|  | Pakistani |  |  | Pakistani |
|  | Bangladeshi |  |  | Bangladeshi |
|  | Chinese |  |  | Chinese |
|  |  |  |  |  |
|  | Any other Asian background, please write in |  |  | Any other Asian background, please write in |
|  |  |  |  |  |
|  |  |  |  |  |
| D | Black, Black Scottish, or Black British |  | D | Black, Black Scottish, or Black British |
|  | Caribbean |  |  | Caribbean |
|  | African |  |  | African |
|  |  |  |  |  |
|  | Any other Black background, please write in |  |  | Any other Black background, please write in |
|  |  |  |  |  |
|  |  |  |  |  |
| E | Other ethnic background |  | E | Other ethnic background |
|  | Arab, Arab Scottish or Arab British |  |  | Arab, Arab Scottish or Arab British |
|  | Any other background, please write in |  |  | Any other background, please write in |
|  |  |  |  |  |
|  |  |  |  |  |
| F | Prefer not to say |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| G | Do you consider yourself or anyone in your household to have a disability? | Yes | No |

|  |
| --- |
| 1. **Data Protection Act 1998 & Declaration** |

1. Declaration of Interest

All housing tenancy offers are made in accordance with our Housing Allocations Policy. We ask housing applicants to declare any relevant connections to New Gorbals HA Management Committee members or our employees. This will help us to manage any potential conflicts of interest in an appropriate manner.

Our aim is to ensure our Committee members, employees, or relatives or close friends of either, do not receive any preferential treatment due to a connection with the Association. Nor should they be unfairly disadvantaged, though any such allocations generally will require prior approval by our Committee.

|  |  |  |  |
| --- | --- | --- | --- |
| Either NOW or WITHIN THE LAST 12 MONTHS, have you or any of your relatives been: | | | |
| Are you a Management Committee member of the Association or NGPM subsidiary? | | Yes | No |
| Are you a relative or close friend of a Management Committee member of the Association or NGPM subsidiary? | | Yes | No |
| An employee of New Gorbals Housing Association? | | Yes | No |
| Are you a relative or close friend of an employee of the Association? | | Yes | No |
| If YES, please state the following | | | |
| Name of Relative |  | | |
| Address of Relative |  | | |
| Relationship to you |  | | |
| Their Position Held |  | | |

1. Declaration on Data Protection

All information provided within this application will be treated in confidence and comply with the Data Protection Act 1998. All the information you give us on this form will be placed in secure files and will be used for purposes of assessing your housing need as defined in the Allocation Policy. You can see your application held on request.

**Please read and sign the following declaration**

|  |  |
| --- | --- |
| * I/we authorise New Gorbals Housing Association Limited and its subsidiary to make enquiries and to obtain such information as they consider necessary, for the purposes of assessing my housing application. I/we agree that the Association may do so by contacting such persons as they consider appropriate. * I/we give permission for New Gorbals Housing Association Limited and its subsidiary to verify any information supplied on this form (e.g. with my employer, landlord or a local authority). I also give my permission for the Association to approach my/our present or former landlord(s) to disclose tenancy details, including my/our adherence to the tenancy conditions. | * I/we give consent to the processing of all personal information provided to New Gorbals Housing Association Limited and its subsidiary in connection with: * this housing application; and/or * any tenancy granted to me/us as a result of this housing application. * I/we certify that the information given in this application for housing is true. * I/we understand that any false or misleading information, or information deliberately withheld, may result in: * this application being cancelled; and/or * any offer of tenancy being withdrawn; and/or * an application to the Sheriff Court for an eviction order if the tenancy has been granted. |

Signed (Applicant)       Date

Signed (Joint Applicant/Partner)       Date

|  |
| --- |
| 1. **Invite to Interview** |
| If your application for Mid Market Rent appears eligible, you will be invited to view the property. If you accept the offer of a property the following supporting evidence will be required. | |
| 1. **Two forms of identification for everybody aged 16 and above included on the application**  * TYPE 1 Photographic proof of identity i.e. Passport or Driving License * TYPE 2 Proof of Current Address i.e. Utility bill, Doctors letter, Mobile Phone bill  1. **Proof of all children under 16 who intend to live in the property**  * Birth certificate, custody arrangements etc  1. **Three consecutive months of recent payslips for yourself and partner (if applicable)** 2. **Three consecutive months of all bank account statements for each named applicant** 3. **Supporting documents for all other eligible sources of income (i.e Child Benefit, Working Tax Credit, Pension Payments, Universal Credit, Housing Benefit etc)** | |