



Office use only : Applicant Number

It is a Charity Commission requirement to investigate the personal circumstances of applicants for almshouses. The personal data supplied on this form, and other information relating to an almshouse appointment, will be held on file for a short period of time but will then be destroyed in you are unsuccessful. Some details may be checked with relevant organisations for example South Cambridgeshire District Council. You may have access to your personal information on request.

## APPLICATION FOR ACCOMMODATION

### 1 HOUSEHOLD DETAILS

A. Please list below your details and those of anybody else to be housed with you.

	SURNAME	FORENAMES	TITLE (Mr/Mrs/Ms)	DATE OF BIRTH
APPLICANT				
PARTNER				
	SURNAME	FORENAMES	DATE OF BIRTH	RELATIONSHIP TO APPLICANT (son/daughter/etc )
OTHERS TO BE HOUSED				

e-mail:.....

		OFFICE USE ONLY:			
Applicant number	Age	Dependants	Age	girl [ ]	boy [ ]
			Age	girl [ ]	boy [ ]
SS client	yes/no		Age	girl [ ]	boy [ ]

IF ANY PERSON ON THIS APPLICATION IS EXPECTING A CHILD PLEASE GIVE DETAILS, INCLUDING EXPECTED DATE OF BIRTH:

.....

B. Please give your current address and telephone number.

ADDRESS. ....

..... POSTCODE:.....

Telephone Number: Home:..... Mobile:.....

C. How long have you lived at this address? .....

D. Please tell us how long you have lived in Sawston?.....

If you do not live in Sawston or haven't lived here for very long please explain your connection to the village (you will be expected to bring proof if you are invited for interview)

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 .....  
 .....

**2 PRESENT ACCOMMODATION:**

A. What type of accommodation do you live in at present? .....  
 (eg house/flat/bedsit/room/caravan/ bungalow):

B. How many bedrooms do you have? .....

C. Do you rent your accommodation? Yes No

D. If you are renting, how much rent do you pay? £.....per week

How much notice do you need to give? .....

E. Does this include payment of domestic bills, i.e. gas or electricity? Yes No

F. If you are a Tenant, please give your Landlord's name and address, and details if they are a family member

Name .....

Address .....

G. Do you have any rent arrears with your current or previous Landlord? Yes No

If yes, how much are your arrears:

a) With your current Landlord/ previous landlord £ .....

Name of previous Landlord with whom you have rent arrears:

.....

H. Do you own your accommodation? Yes No

I. If yes, what are your mortgage repayments? £.....per month

J. Do you own or part own any property apart from the one you live in? Yes No

K. Do you have any other tenancy in your name? Yes No

If Yes, please give details: .....

.....

L. Are you living with parents/friends? Yes No

If yes, how much housekeeping/rent do you pay? £.....per week

M. Do you share facilities with others not on the application? Yes No

If yes, please give details:

.....

N. Are you on any other waiting lists? Yes No

If you have ticked yes, please give names of the Council or Housing Association.

.....

What is your Home link band? A B C D

Please list all the other addresses where you and your partner have lived in the past 5 years:

Address	Dates you lived there	Owned or rented	Reason for leaving	Name and contact details of the landlord


Describe how your current housing is unsatisfactory?

.....

.....

.....

.....

O. Do you own any pets? Yes No

If yes, please give details:

.....

P. Do you own a car? If yes, how many.....

### 3 INCOME AND WORK DETAILS

Please complete this section carefully as your income is an important factor in assessing your housing need.

A. Economic status (Please tick)

	APPLICANT	PARTNER	OTHER
WORKING FULL TIME			
WORKING PART TIME			
TRAINING/STUDENT			
UNEMPLOYED			
RETIRED			
AT HOME			
INCAPACITATED			
OTHER			

## B If working, please give details of employment and take-home pay

NAME AND ADDRESS OF EMPLOYERS:	
Applicant Employer	
Partner Employer	
TAKE HOME PAY WEEKLY	
Applicant £.....	Partner £.....

## C If receiving state benefits please give details

	Applicant	Partner
Employment Seekers Allowance, or other work related benefit	£ per week	£ per week
Council Tax Support	£ per week	£ per week
Housing Benefit	£ per week	£ per week
Child Benefit	£ per week	£ per week
Working Tax Credit	£ per week	£ per week
Child Tax Credit	£ per week	£ per week
Other Benefits – for example AA, DLA, PIP or carers allowance	£ per week	£ per week

D If receiving a pension (Please give details):

	Applicant	Partner
State Pension	£ per week	£ per week
Occupational Pension	£ per week	£ per week
Pension Credits	£ per week	£ per week

E SAVINGS: Please give the total amount of any personal savings you may have

£.....

**4 EQUAL OPPORTUNITIES**

JHC believes in Equal Opportunities. There is no obligation to answer this question nor will it affect your application. If you are a couple, please tick twice.

Do you have a disability? Yes No

If yes, what is the nature of the disability?

.....

Do you or anyone on your application have any health problems that are made worse by your present housing conditions, if yes please give details.

Yes No

Details.....  
 .....  
 .....

How would you describe your ethnic origins?

	African	Asian	Southeast Asian	Black British	Caribbean	European	Irish	White British
Applicant								
Partner								
Other (please state)								

## 5. DEBT ISSUES

We understand that this is a sensitive subject but feel it is important for the Trustees to have a complete picture of prospective residents' finances. Do you or your partner have any outstanding debts?

Yes

No

If yes please give details below

	Applicant	Partner
Debt Amount		
Owed to whom		
Debt Amount		
Owed to whom		
Debt Amount		
Owed to whom		
Debt Amount		
Owed to whom		

Describe what difference it would make to you if we were able to offer you a house?

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Please give the names, addresses and telephone numbers of two referees, one of whom should be a landlord or employer, whom we can contact for their support of your application.

**A family member is not acceptable.**





