# Merton's Community and Housing Department

Name	User PIN
Address	User ID
Postcode	
Registration No:	

# Choice Based Lettings Application Form

(for new customers and existing council and housing association tenants)





November 2008



#### **Guidance Notes**

Please fully answer all the questions on this form. If you have difficulty with any questions, we can help you. Contact the Housing Needs Section at Merton Link, Civic Centre, London Road, Morden, Surrey. Please phone us on 020 8545 3719, 020 8545 3720 or 020 8545 4119.

We are open between 9am and 5pm Monday to Friday. However, if you need to be seen in private for a personal assessment, it would be best if you could come in between 9am and 12noon or from 2pm to 4pm. This could avoid you having a long wait and make sure that we have enough time to deal with your case fully.

We are sorry to have to ask you to fill in such a long form. Please answer all the questions to make sure that any accommodation offer meets our legal requirements, and any advice or help we give takes account of your need. Please remember that if we accept your housing application form, this does not mean that you are entitled to an offer of accommodation.

We can only assess your application if you answer all the questions on this form accurately. Incorrect answers may mean that you do not get all the points due to you or may delay the registration of your application. Remember that we will not consider you for rehousing until we have checked all the information you have sent us.

Please note that we cannot accept unsigned applications.

We will write to you to say if you are eligible for registration. Any change in your circumstances, or those of any other person included on your application, may affect your chances of being rehoused, so you should tell the Housing Needs Section as soon as you can when changes happen.

#### **Data Protection Act 1998**

The London Borough of Merton and its partnership organisations may use the information that you give on this form for legal purposes. We may also use the information to prevent and detect crime, and pass it to appropriate organisations for this purpose.

#### Warning for people applying to our housing register under the Housing Act 1996

Please note that when applying for housing under the above act, it is a criminal offence if you:

- knowingly or carelessly give false information;
- withhold information; or
- fail to tell us as soon as possible of any changes in your circumstances which affect your right to rehousing.

If our enquiries show that you have committed such an offence, we can prosecute you. If you are found guilty, you may be fined up to £5,000.

When you have filled in this form, please return it to the Housing Needs Section, Community and Housing Department, Merton Civic Centre, London Road, Morden, Surrey SM4 5DX.

## **Section 1 – People Who Need Accommodation**

If you have a partner, both you and your partner must fill in and sign this form.

#### You

Last name		
Any other last names you have been known by		
First names		
Address		
	Postcode	
National Insurance number	/ D.O.B	
Phone numbers		
Home		
Work		Extension
MobileEmail address		

#### **Your Partner**

Last name		
Any other last names they have been known by		
First names		
Address (if different from above)		
	Postcode	
National Insurance number	/ D.O.B	
Phone numbers		
Home		
Work		Extension
Mobile		
Email address		

Section 2 – Your	Household				
Is anybody in this app Please tick the relevan					
Yes No	]				
If 'Yes', please give the <b>Name</b>	e following details.				
Date the baby is due	/ /				
	the certificate of expects after the child has been		ent. Reme	mber to se	end a copy of
List of household me	mbers				
Please give details of t	the people you want to be	e housed wi	th you, sta	rting with y	ourself.
Last name	First names	Title (Mr, Mrs, Ms, Miss)	Male or Female	Date of birth	Relationship to you
-	r separated, does your on the should live with you	-	agree that	children fi	rom the
Yes No	]				
	en confirmation from yo owing the arrangements nents.				

Section 3 – Your Immig	ration Status	
	not usually live in the UK, or if yo for housing in certain circumsta	•
	oplication form applying for asyl	um?
Yes No No		
If 'Yes', please give all names		
Last name	First names	Date of asylum application
	pplication under any restriction in its funds, or under a sponsor arr	•
Yes No		
If 'Yes', please give all names		
Last name	First names	Details of restriction
	application been granted refuge limitation or exceptional leave t	-
Yes No		
If 'Yes', please give all names		
Last name	First names	Date of expiry (where this applies)
Are you or your partner from in the UK for the purposes of	n a country within the European of work only?	Economic Area (EEA) living
Yes No No		
If 'Yes', which country are you	or your partner from?	

### Do all these people live with you now?

Yes No		why they do not live with you at the
	name and address, and the reason	why they do not live with you at the
If 'No', please give their moment.		
Name	Address	Reason why they do not live with you at the moment
For all children under the	e age of 16 included in your applica	ation, please send photocopies of:

(a) a full birth certificate (giving the names of the parents and the child); and

(b) a Child Benefit confirmation letter.

Please give the names and addresses of the schools each child goes to.

Child's name	Name and address of the school they go to

## **Section 4 – Equalities Monitoring**

We want to make sure that our housing policies work fairly, and have decided to keep records of everyone who applies for council housing. We would like you to tell us what you consider your ethnic origin, religion or belief, and sexuality to be. We will only use this information for monitoring our housing policies.

Main Ethnic Group	Religion
White	Buddhist
British	Jewish
Irish	Christian
Traveller of Irish heritage	Sikh
Gypsy/Romany	Hindu
Other white (please give details)	Muslim
	None
Mixed	Other
White and black Caribbean	(please give o
White and black African	
White and Asian	I do not want
Other mixed (please give details)	
	Sexuality
Asian or Asian British	Heterosexual
Indian	Lesbian
Pakistani	Gay
Bangladeshi	Bisexual
Tamil	Transgender.
Other Asian (please give details)	Other
	I do not want
Black or Black British	T do not want
African	
Caribbean	
Other black (please give details)	
Other background	
Chinese	
Korean	
Any other background (please give details)	
I do not want to give this information	
<u> </u>	

Religion
Buddhist
Jewish
Christian
Sikh
Hindu
Muslim
None
Other
(please give details)
I do not want to give this information
Sexuality
Heterosexual
Lesbian
Gay
Bisexual
Transgender
Other
I do not want to give this information

We will keep this information confidential and it will not affect your application in any way.

#### **Section 5 - Your Income**

Other state benefits

**Total** 

#### Please give details of all your income and savings.

You **Your Partner Every two Every two Every Every Every Every** Income week weeks month week weeks month Gross wage (amount before deductions) Child Benefit Maintenance Income Support or Jobseekers Allowance Retirement and occupational pension **Incapacity Benefit** Disability Living Allowance Maternity Allowance Statutory Sick Pay Widow's Allowance Working Tax Credit Children's Tax Credit Housing Benefit Help with mortgage interest

	You	Your Partner
Savings		
Name and address of your emp	oloyer (if this applies)	
Employer		
Address		

Section 6 – Your Health And Welfa	re Information		
Does any person included in this application made worse by their current living conditions	have a medical condition or disability, which is ?		
Please tick the relevant box.			
Yes No No			
If 'Yes', please also fill in our medical assessing please contact the Housing Needs Section a	ment form, which should be attached. If it is not, nd an officer will send you a form.		
Name and address of your doctor			
Your details	Your partner's details		
GP Name:	GP Name:		
Address:	Address:		
Phone Number:	Phone Number:		
Does anyone on this application use a who	eelchair?		
Please tick the relevant box.			
Yes No If 'Yes', say	who this is. Name		
Is the wheelchair used inside the property	?		
Yes No			
Do you or your partner have a social work	er or community psychiatric nurse (or both)?		
Yes No			
If 'Yes', please give details.			
Name:	Name:		
Address:	Address:		
Phone Number:	Phone Number:		

#### **Section 7 – Your Housing Options and Choices**

As at 30/6/2008, we owned 6360 rentable properties. We have:

- 2054 one-bed properties;
- 2131 two-bed properties;
- 2073 three-bed properties; and
- 99 four-bed properties
- 1 five-bed property

For the year April 2008 to March 2009, we estimate we will let 420 homes.

Most of our homes are flats above ground-floor level on estates.

#### **Seaside and Country Homes**

Seaside and Country Homes is a scheme that offers oppurtunities to move to bungalows and flats throughout the south of England and Midlands.

If you are interested in registering for a Seaside and Country Homes move the lead tenant in your household must be at least 60 years of age and live in Council or Housing Association housing in Greater London.

To request an application form please tick here

For more information you can contact the Seaside and Country Homes team on 08450 21 20 20 or visit www.housingmoves.org

#### Have you considered a Mutual Exchange?

The Housing Act 1985 provides that a secure tenant may, with the written consent of the Landlord, assign the tenancy to another secure (Council) or assured tenant (Housing Association) who also has the written consent of his/her Landlord.

Mutual Exchange is another way to assist Transfer Applications move home. Finding someone to exchange with you maybe a quicker way of moving than waiting for a transfer.

There are two methods that can help you:

- You can advertise your details on our mutual Exchange Board in Merton Link.
   Please contact Housing Needs for a form on 020 8545 3626
- You can register online with HomeSwapper for a more wider choice of areas on www.homeswapper.co.uk . HomeSwapper will automatically check for suitable exchange partners for you and send you 'match alerts'.

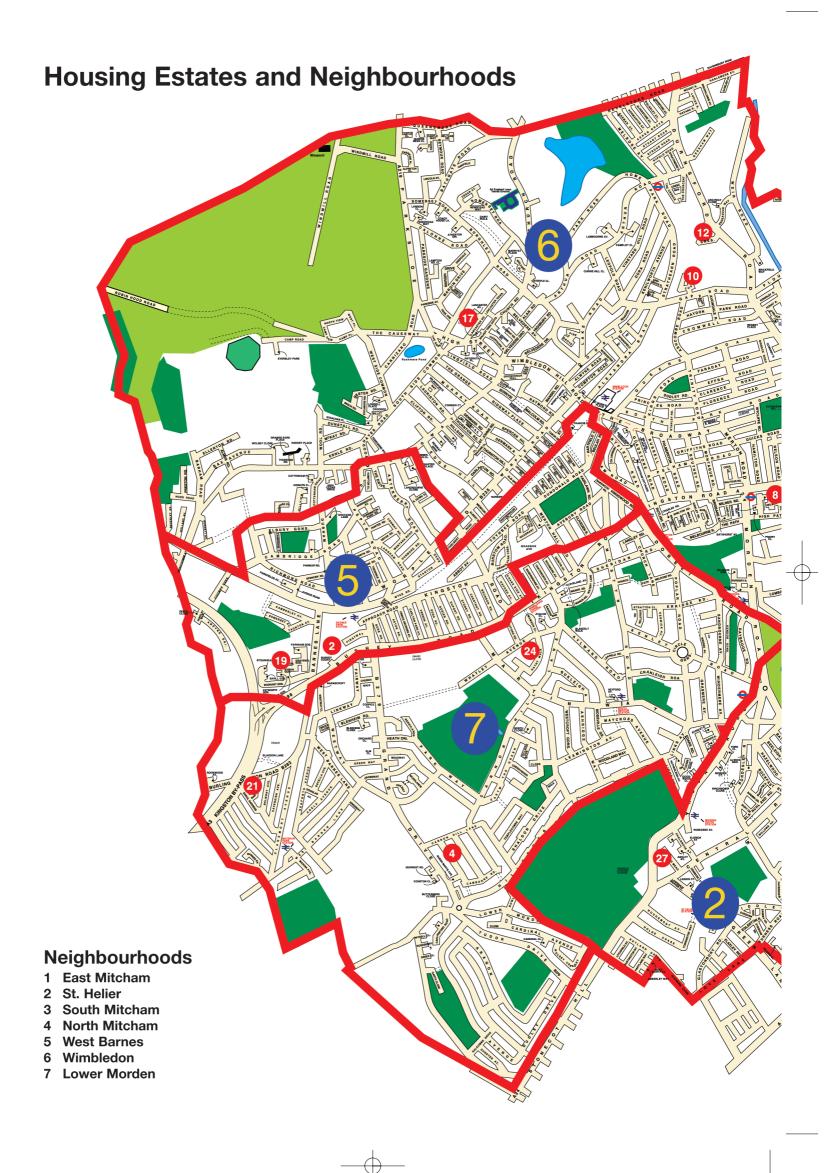
In most cases, we let our homes through our choice-based lettings scheme. When a home becomes available, we advertise it and invite people with priority for housing to tell us whether they want it. In special circumstances, we may offer a property to someone without advertising it. In case we need to do this with you, please tell us where you would like to live.

People who only bid for a house, bungalow, ground-floor flat or maisonnette are likely to wait much longer for an offer of accommodation.

The map in the centre of this application form is to help you choose where in Merton you would like to live. Please note that in some areas there is very little council or housing-association accommodation, and if you only choose these areas this will limit your chances of being rehoused.

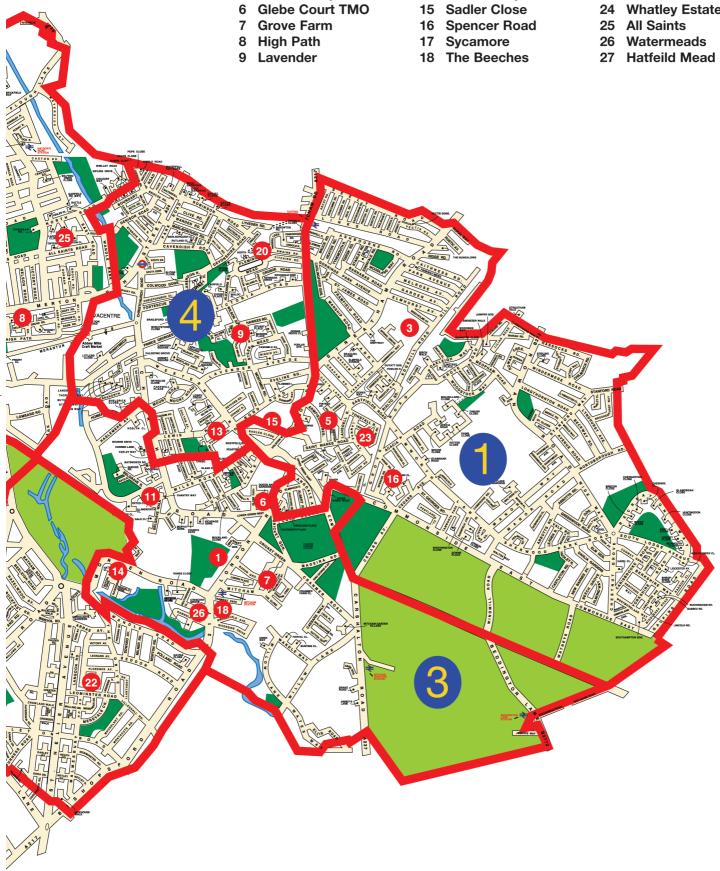
Tick the boxes below to show which areas you want to be considered for. The more areas you choose, the greater your chances of being rehoused.

Pollards Hill (POLLAR) _	」 Raynes Parl	k (RN5)			
East Mitcham (RN1)	Wimbledon	(RN6)			
Morden (RN7)	Lower Mord	den (RN2)			
South Mitcham (RN3)	Tadworth (R	₹N8)*			
North Mitcham (RN4)	7	·			
*We have nomination rigand Banstead, which is	•	_		rth in the boro	ugh of Reigate
Please tick the appro following property type	-	tell us if y	ou want to	be considered	d for any of the
Flat		House		Bedsit	
Maisone	tte 🗌	Bungalow		Supported by warden (elderl	_
Do you consider yourself a keyworker? Yes  No  Please indicate which keyworker category applies to you:					
NHS Staff		Р	robation Serv	/ice	
Teacher		F	re and rescu	e 🗌	
Police		Lo	ocal authority	, <u> </u>	
British Transport Police		С	hildren and F	amily Court Ad	dvisory
City of London Police		aı	nd Support S	ervice 🗌	
Prison Service					/practitioner 🗌
Ministry of Defence				of the Highway	s Agency
		Tr	raffic Officer	service 🗌	



#### **Estates:**

- 1 Baron Estate
- 2 Bushey Court
- 3 Eastfields
- 4 Edinburgh Court
- 5 Elm Nursery
- 10 Moffatt Court
- 11 Phipps Bridge
- 12 Pitt Crescent
- 13 Portland/Lewis Road
- 14 Ravensbury
- 19 West Barnes Lane
- 20 Abbey Orchard
- Shelley/Byfield
- 22 St. Helier
- 23 Laburnum Court
- 24 Whatley Estate



Section 8 – Your Present	Accommodation
When did you move to your pre	esent address?
/ /	
Can we write to you at this add	Iress?
Please tick the relevant box.	
Yes No	
If 'No', give a contact address where we can write to you.	
Please tick the box which best	describes your present housing circumstances.
A private tenant	Living with relatives
Council tenant	Housing-association tenant
Living with parents	Living in a hostel or bed and breakfast
A Lodger	Living in accommodation provided with a job
An owner or part-owner	No fixed address
In armed forces	In prison, an institution or a hospital
Other	Please give details————————————————————————————————————
Are you living in temporary acc	commodation that has been provided by:
(a) our Homeless Persons Unit	? Yes No No
(b) any other authority's Home	less Persons Unit? Yes  No
If 'Yes', which authority?	
If you are a private tenant, have address?	e you ever had a written tenancy agreement for this
Please tick the relevant box.	
Yes No	
	of the tenancy agreement with this application form. If your sured shorthold tenancy at the start of your tenancy, please

## What type of property do you live in?

Please tick the releva	ant box.		
Whole house	Bungalow	Hostel	
Flat	Bedsit	Bed and breakfast	
Maisonette	Caravan	Room in a shared house.	
What is your landlo	rd's or landlady's na	me and address?	
If you are staying wit	h relatives or friends,	give their names here.	
Name			
Address			
Address			
Landlord's phone n	umber [		
Are you related to y	our landlord? Yes [	□ No □	
If 'Yes', what is the re	elationship?		
Do you share any a	ccommodation with	your landlord or his or he	r family?
Please tick the releva	ant boxes.		
Nothing shared	Kitchen	Toilet	
Bathroom	Living area	Corridor and stairs	

The accommodation you live in					Office use only	
Please tell us how many rooms are used for all t	the people in	cluded on this	s application	1.		
	Bedrooms	Bedsitting rooms	Living rooms	Kitchen		
Number of rooms you and your family live in					Lack of bedrooms	
Which floor is your accommodation on (ground, first, second and so on)?			ls th	nere a lift?	Children under one Pregnant	
<b>Bedroom</b> Do you share your bedroom with someone not incomplet what relationship are they to you (for example, br			Yes	No.	Under-occupation Teenage gap Sex separation Two children sharing with parents	
		- Intona)		<u>'</u>	Sharing with paronto	
Living room  Do you have access to a living room?  Do you have to share it with other people?			Yes Yes	No No	Living room	
Bathroom Do you have use of a bathroom? Do you share it with other people?			Yes Yes	No No	Bathroom	
Toilet Is it inside the property? Do you share it with other people?			Yes Yes	No No	Toilet	
Kitchen Do you have access to a kitchen? Do you share it with other people?			Yes Yes	No No	Kitchen	
<b>Cooking</b> Do you have use of a cooker?			Yes	No	Cooker	
If so, where is it?						
If not, what other cooking facilities do you have?						
Do you have central heating?			Yes	No	Waiting time	
If you share with other people, what relationship a lf they are not related, please answer 'none'.	re they to you	1?			Living with relatives Living with dependent relatives	

Section 9 - Other Accommod	dation
Does any person in this application business property in the United Kir Please tick the relevant box.	n own or has owned in the past any residential or ngdom or in any other country?
Yes No No	
If 'Yes', please give the address.	
Date your ownership ended (where this applies)	/ /
Please enclose documents that prove	e this and the amount you received from the sale.
Only fill in this section if you own y	our accommodation.
Do you have a mortgage?	Yes
What are your monthly repayments?	£
Are you behind with the mortgage rep	payments? Yes  No
If 'Yes', how much?	£
How much mortgage do you still hav If you do not have to pay any, please wr	
Are you planning to sell your home?	Yes No No
Give the current value of your home	£
Lender's name and address	
Mortgage account number	
Is any person in this application the property in the United Kingdom or Please tick the relevant box.	
If 'Yes', please give the address	
Landlord's name and address	
Landlord's phone number	
Give reasons for not living there.	

Have you or your partner been a tenant	t of a counc	il or housing association	on before?
Please tick the relevant box.			
Yes No No			
If 'Yes', what was the address?			
Name of council or housing association			
Date the tenancy ended	/ /	,	
Reason the tenancy ended			
Only fill in this section if you are homele	ess or threa	tened with homelessn	ess.
Do you have to leave your present addresse tick the relevant box.	ess?		
Yes No No			
If 'Yes', when do you have to leave?			
If 'Yes', why do you have to leave?			
Have you been given any of the following Please tick appropriate boxes	ng in relatio	n to your present acco	mmodation?
Verbal notice from your landlord		Court summons for po	ssession
Letter from your landlord telling you to lea	ıve	Possession order	
Notice to quit or notice of seeking posses	sion	Bailiff's warrant	
If you have received any of the documents form and contact the Housing Advice Sec You should be aware that many tenants covour accommodation until you have contact the contact that many tenants of t	tion on 020 an only be e	8545 3734 or 020 8545 victed by a court order.	3735. <b>Do not leave</b>

## **Section 10 – Your Previous Accommodation Your Addresses** Start with the address you lived in before you moved to your current home and work back. Most recent address 1 Dates you lived there **Housing arrangement** Council or housing association From То ☐Private tenancy Owner-occupier Phone number: Staying with friends or relatives Other (describe) Reason for leaving: Name and address of landlord (if this applies): Phone number: Previous address 2 Dates you lived there **Housing arrangement** Council or housing association From То Private tenancy ...../...../...../ Owner-occupier Phone number: Staying with friends or relatives Other (describe) Reason for leaving: Name and address of landlord (if this applies): Phone number: Previous address 3 Dates you lived there **Housing arrangement** Council or housing association From То Private tenancy Owner-occupier Phone number: Staying with friends or relatives Other (describe) Reason for leaving: Name and address of landlord (if this applies):

If you have had more than three addresses in the past five years, please provide details.

Phone number:

#### **Your Partner's Addresses**

Previous address 1	Dates they	lived there	Housing arrangement
	From	То	Council or housing association
			Private tenancy
	_		Owner-occupier
Phone number:			Staying with friends or relatives
			Other (describe)
Reason for leaving:			
Name and address of landl	ord (if this applie	es):	
		Phone	number:
Previous address 2	Dates they	lived there	Housing arrangement
	From	То	Council or housing association
		, ,	☐Private tenancy
	////		Owner-occupier
Phone number:			Staying with friends or relatives
			Other (describe)
Reason for leaving:			
Name and address of landl	ord (if this applie	es):	
		Phone	number:
Previous address 3	Dates they	lived there	Housing arrangement
	From	То	Council or housing association
		10	☐Private tenancy
	////	//	Owner-occupier
Phone number:			Staying with friends or relatives
			Other (describe)
Reason for leaving:			
Name and address of landl	ord (if this applie	ve).	
. tame and address of fatfat		,.	
		Phone	number:

Section 11 – Other Application Details					
Have you or your partner applied to us before for rehousing?					
Please tick the relevant box.					
Yes No No					
If 'Yes', please give the following details.					
Date of the application / /					
Reference number (if known)					
Have you applied to any other local authority for housing?					
Please tick the relevant box.					
Yes No No					
If 'Yes', please give the name of the authority.					
Are you registered on that authority's housing list?					
Yes No No					
Reference number (if known)					
Are you employed by the London Borough of Merton? Yes  No					
If 'Yes', please say which department.					
Are you related to any member of the Community and Housing Department staff?					
Yes No No					
If 'Yes', please give their name.					
Are you related to a Merton councillor?					
Yes No No					
If 'Yes', please say which councillor.					

Section 12 - Inclusion	on Staten	nent						
Everyone included in your partner) must fill in the incl			•	ot inclu	ıding yo	urself	and y	our
Name								
I want to be included in t	his housin	g applica	ition.					
Signature					Date:		/	/
Name								
I want to be included in t	his housin	g applica	ition.					
Signature					Date:		/	/
Name								
I want to be included in t	his housin	g applica	ition.					
Signature					Date:		/	/
Name								
I want to be included in t	:his housin	g applica	ition.					
					Data		/	/
Signature					Date:			<i>'</i>
Section 13 – Declara	ation							
I/we confirm that, as far as		e informa	tion given i	n this fo	orm is c	orrect.		
I/we understand that any flosing any tenancy that I/w				•		•		
I agree to tell the Housing application.	Needs Sec	tion abou	t any chan	ge in my	y circum	nstanc	es giv	en in this
I give you permission to m details given.	ake any en	quiries th	at are reaso	onably r	necessa	ry to c	onfirn	n any
Your signature								
Print name								
Date	/	/						
Your partner's signature								
Print name								
Date	/	/						

#### A reminder of the documents we need to see

If you do not send the following documents, it may delay us in processing your application.

- Certificate of expected date of confinement to confirm your pregnancy
- ID (passport or birth certificate) for all people included in this application
- Immigration documents
- For all children under 16, a copy of the Child Benefit confirmation letter
- Parental agreement for looking after children. Divorce and separation papers showing the arrangements for the children
- Tenancy agreement and any documents asking you to leave your home
- Agreement on residency of children
- Court order for possession or a bailiff's warrant

If you cannot provide photocopies, bring the original documents to Merton Link Reception at the Civic Centre and we will copy them for you.

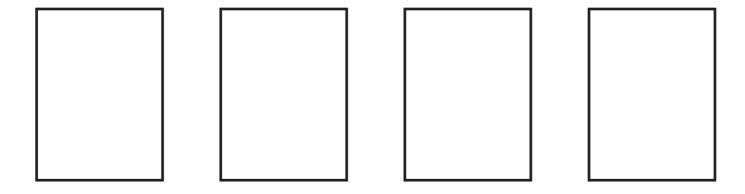
We will write to you to say if you are eligible to register. Any change in your circumstances or those of any person included in your application may affect your chances of being rehoused, so you should tell the Housing Needs Section as soon as you can when any changes happen.

#### **Photographs**

Please make sure that you include two recent colour passport-sized photographs of yourself and any partner (if appropriate), with this application form.

Each photograph should be a fair likeness of the person and have their full name printed on the back with their signature.

If you do not send us these photographs, we will not be able to register your application.



Nese deshironi me shume informacion ne gjuhen tuaj, ju lutemi te na kontaktoni ne adresen e dhene ne kutine me poshte.

যদি আপনার নিজের ভাষায় লেখা আরও তথ্য চান তাহলে দয়া করে আমাদের সঙ্গে যোগাযোগ করুন, তলার বক্ সে আমাদের ঠিকানা রয়েছে |

如果你需要用中文印成的資料, 請按低端方格內提供的地址与我們聯系。

Pour tout renseignement complémentaire dans votre propre langue, veuillez nous contacter à l'adresse figurant dans l'encadré du bas.

हुं જો તમને તમારી પોતાની ભાષામાં વધારે માહિતી જોઈતી હોય, તો કૃપા કરીને हिं नीચે અંતમાં આપેલા ખાનામાં દર્શાવેલા સરનામે અમારો સંપર્ક કરો.

ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਵਿਚ ਹੋਰ ਜਾਣਕਾਰੀ ਲੈਣੀ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਕ੍ਰਿਪਾ ਕਰਕੇ ਹੇਠ ਲਿਖੇ ਖਾਨੇ ਵਿਚ ਦਿੱਤੇ ਪਤੇ 'ਤੇ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

Hadii aad u baahan tahay faahfaahin intaa kabadan oo ku soobsan afkaaka hooyo ama Af Somali fadlan lana soo xiira cinwaanka hoos ku qoran.

Si usted desea más información en su propia lengua, por favor contáctenos en la dirección al pie del formato.

You can also get this information in large print, in Braille and on audio tape.

Morden SM4 5DX Tel: 020 8545 3731