

Island HomeFinder

application form

Please complete and return
this application to:

Housing Services, Floor 2, County Hall,
Newport, Isle of Wight, PO30 1UD

Tel. (01983) 823040

Fax. (01983) 823050

Email: housing@iow.gov.uk

Web: www.islandhomefinder.org.uk

If you have difficulty understanding this document, please contact us on 01983 821000 and we will do our best to help you.

Arabic

إذا كان لديك صعوبة في فهم هذه الوثيقة، الرجاء الاتصال بنا على هاتف رقم 01983 821000 وسوف نذل قصارى جهننا لمساعدتك.

Hindi

यदि आपको इस दस्तावेज़ को समझने में कठिनाई पेश आ रही है तो, कृपया हमारे साथ 01983 821000 पर सम्पर्क करें और हम आपकी सहायता करने का पूरा प्रयास करेंगे।

Punjabi

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਹ ਦਸਤਾਵੇਜ਼ ਸਮਝਣ ਵਿਚ ਮੁਸ਼ਕਲ ਪੇਸ਼ ਆ ਰਹੀ ਹੈ ਤਾਂ ਕ੍ਰਿਪਾ ਕਰਕੇ ਸਾਡੇ ਨਾਲ 01983 821000 'ਤੇ ਸੰਪਰਕ ਕਰੋ ਅਤੇ ਅਸੀਂ ਤੁਹਾਡੀ ਸਹਾਇਤਾ ਕਰਨ ਦੀ ਪੂਰੀ ਕੋਸ਼ਿਸ਼ ਕਰਾਂਗੇ।

Urdu

اگر آپ کو اس دستاویز کو سمجھنے میں مشکلات کا سامنا ہو تو برائے مہربانی ہم سے اس نمبر پر رابطہ کیجئے 01983 821000 اور ہم آپ کی مدد کرنے کے لیے ہر ممکن کوشش کریں گے۔

Chinese

如果您对此份文件难以理解，请致电01983821000与我们联系。我们将力尽所能帮助您。

Bengali

এই ডকুমেন্টে বা পত্রকে অনুগ্রহ করে আমাদেরকে 01983 821000 নাম্বারে ফোন করবেন। আমরা আপনাকে যথাসাধ্য সাহায্য করবো।

Polish

Jeśli mają Państwo trudności w zrozumieniu niniejszego dokumentu, prosimy o kontakt z nami pod numerem 01983 821000 – dołożymy wszelkich starań, by Państwu pomóc.

French

Si vous avez des difficultés à comprendre ce document, veuillez nous appeler au 01983 821000 et nous ferons de notre mieux pour vous aider.

Italian

Per ulteriori chiarimenti su questo documento, Vi preghiamo di contattarci per telefono al numero 01983 821000 dove riceverete la nostra migliore attenzione.

German

Sollte es Ihnen Schwierigkeiten bereiten, dieses Dokument zu verstehen, rufen Sie uns bitte an unter 01983 821000, und wir werden unser Bestes tun, um Ihnen zu helfen.

Hungarian

Ha nehézséget okoz e dokumentum értelmezése, kérjük, forduljon hozzánk a 01983 821000 számon, és minden tőlünk telhetőt megteszünk, hogy segítsünk.

Spanish

Si tiene dificultad para entender este documento, por favor póngase en contacto con nosotros llamando al número 01983 821000 y haremos todo lo posible para ayudarle.

Romanian

Dacă aveți dificultăți în înțelegerea acestui document, vă rugăm să ne contactați la numărul 01983 821000 și vom face tot ceea ce putem să vă ajutăm.

This form is available on
request as an audiotape,
in large print and in Braille.
For further details, please
contact housing services
on (01983) 823040.



Your household

| Title | Surname | First name | Date of birth | Relationship to applicant | Sex | National insurance number | To be rehoused with you |
|-------|---------|------------|---------------|---------------------------|-----|---------------------------|-------------------------|
| | | | | Applicant | M/F | | |
| | | | | | M/F | | Y/N |
| | | | | | M/F | | Y/N |
| | | | | | M/F | | Y/N |
| | | | | | M/F | | Y/N |
| | | | | | M/F | | Y/N |
| | | | | | M/F | | Y/N |

Are any of those people listed above not currently living with you?

| Their name | Their current address | Relationship to applicant |
|------------|-----------------------|---------------------------|
| | | |
| | | |
| | | |

| Your current address | Contact details |
|----------------------|--|
| Postcode: | Home phone: |
| | Mobile phone: |
| | Email address: |
| | Date you moved to this address (dd/mm/yyyy): |

What is your preferred method of contact?

Email

Letter

| | | |
|---------------------|---------|----------|
| FOR OFFICE USE ONLY | App no. | App date |
| | | |

If you have lived at your current address for less than five years, please give details of your previous addresses within the last five years starting with the most recent.

| Address | Date moved in | Date moved out | Tenure eg, rented, family, owned, other | Reason for moving |
|---------|---------------|----------------|---|-------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Please list the previous addresses of the joint applicants in the last five years starting with the most recent.

| Address | Date moved in | Date moved out | Tenure eg, rented, family, owned, other | Reason for moving |
|---------|---------------|----------------|---|-------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Have you ever been known by a different name? If yes, please tell us your previous name.

Do you own or rent any other property in the UK or elsewhere in the world apart from the one you're living in now?

Yes

No

If yes, please state the address and indicate whether you rent or own this property.

| Address | Rent | Own |
|---------|------|-----|
| | | |
| | | |

What is your nationality?

Have you been a UK resident continuously for two years?

Yes

No

If no, are you subject to any form of immigration control in order to enter or remain in the UK?

Yes

No

Are you or any member of your household pregnant?

 Yes No

If yes, please state who and the estimated date of birth

| Name | Sex (male, female, unknown) | Estimated date of birth |
|------|-----------------------------|-------------------------|
| | | |
| | | |

Have you or a member of your household ever been a council or housing association tenant?

 Yes No

If yes, please provide the following details

| Who | Address | Date moved in | Date moved out | Landlord |
|-----|---------|---------------|----------------|----------|
| | | | | |
| | | | | |

Have you or a member of your household ever been evicted from a property because of rent arrears or anti-social behaviour?

 Yes No

If yes, please provide the following details

| Who | Address | Date moved in | Date moved out | Landlord |
|-----|---------|---------------|----------------|----------|
| | | | | |
| | | | | |

You will not be considered for housing if you have any current or past housing debt unless you have been making regular agreed payments for at least six months.

Have you or any other member of your household ever been served with an Anti-Social Behaviour Order (ASBO)?

 Yes No

If yes, please provide the following details

| Who | Address | Date moved in | Date moved out | Landlord |
|-----|---------|---------------|----------------|----------|
| | | | | |
| | | | | |

What is your present type of home?

- House Flat Maisonette Mobile home/Caravan
 Bedsit/Studio Bungalow Sofa Surfing Sleeping Rough

How many bedrooms are available to your household?

- Bedsit 1 2 3 4 5 6

What floor level do you live on?

- Lower Ground First Second Third Fourth +

Do you have the use of a lift?

- Yes No

Please tick which box best describes your current situation.

- You are living with relatives You are living with friends You are a lodger

- You are renting from a private landlord (please state below the name and address of landlord)

- You are a council tenant (please state below, which council)

- You are a housing association tenant (please state below, which housing association)

- | | |
|---|---|
| <input type="checkbox"/> You own your own home | <input type="checkbox"/> You are a mobile home owner |
| <input type="checkbox"/> You are living in sheltered housing | <input type="checkbox"/> You are living in a rented mobile home |
| <input type="checkbox"/> You are living in accommodation tied to your job | <input type="checkbox"/> You are living in HM Forces accommodation |
| <input type="checkbox"/> You are living in a bed and breakfast | <input type="checkbox"/> You are living in temporary housing provided by your local authority |
| <input type="checkbox"/> You live in a hostel | <input type="checkbox"/> You live in a Women's Refuge |
| <input type="checkbox"/> You are in hospital/prison/other institution | <input type="checkbox"/> You are living in a care/nursing home |
| <input type="checkbox"/> You are squatting | <input type="checkbox"/> You are sofa surfing |
| <input type="checkbox"/> You are sleeping rough (eg, outdoors) | <input type="checkbox"/> Other (please state) |

Does your home lack any of the following facilities?

- Cooking Toilet Electricity Water Supply Bathroom/Shower

Do you share any of the following facilities with another household?

- Cooking Toilet Bathroom/Shower

Is the condition of your current home likely to seriously affect the members of your household?

Yes

No

If yes, please give details

Have you informed your landlord of the above?

Yes

No

If yes, please give details of their response and any work carried out on the property as a result.

If you rent your current home, how much is your rent?

£

Per week/month

Are you in arrears with your rent?

Yes

No

If yes, how much?

£

You will not be considered for housing if you have any current or past housing debt unless you have been making regular agreed payments for at least six months.

If you own your current home, please give us the following details:

What is its value?

£

Outstanding mortgage or loan

£

Mortgage lender

Are you in arrears with your mortgage repayments?

Yes

No

If yes, how much?

£

Have you or a joint applicant received a Notice or Court Possession Order requiring you to leave your current home?

Yes

No

What date do you have to leave?

Have you been accepted as being statutory homeless by a local authority?

Yes

No

What date do you have to leave?

Please list all sources of income that normally come into your household each week.

| Type of income (eg, Income Support, wages) | Amount | Frequency |
|--|--------|-----------|
| | | |
| | | |
| | | |
| | | |

Do you or any member of your household have any savings or investments? Yes No

If yes, please give details below.

| Description | Amount |
|-------------|--------|
| | |
| | |
| | |
| | |

When assessing your housing need, we will consider whether your current housing is adversely affecting your welfare or medical needs.

Do you or any person applying with you have any of the following?

| Condition | Who | Details |
|--|-----|---------|
| A physical disability | | |
| A learning disability | | |
| A chronic or progressive medical condition | | |
| A diagnosed medical illness | | |
| A sensory impairment | | |

Is where you are living now, affecting your medical/health condition listed above? Yes No

If yes, how would it be improved if you moved?

Are you or any member of your household at risk of, or suffering from violence, physical, emotional or sexual abuse whilst in your current home? Yes No

If yes, we will contact you for further information.

Please tick the box that best describes your situation or any other member of your household.

| | Need or requirement | Tick | Which person does this relate to? |
|---|---|------|-----------------------------------|
| A | Use a wheelchair indoors most of the time, including kitchen and bathroom. | | |
| B | Occasionally need to use a wheelchair indoors, unable to climb steps or stairs. | | |
| C | Do not use a wheelchair indoors but cannot climb steps or stairs. | | |
| D | Can manage one or two steps. | | |
| E | Can manage one flight of stairs | | |

Do you or anyone included in this application currently receive support in your home (eg, from a carer, social services, friends or relatives)?

Yes

No

If yes, please give details below.

| Name of person receiving support | Who provides support? | Frequency |
|----------------------------------|-----------------------|-----------|
| | | |
| | | |
| | | |

Would support be required in your new home?

Yes

No

If yes, please give details below.

| Name of person receiving support | Details of support needed |
|----------------------------------|---------------------------|
| | |
| | |
| | |

Have you been permanently resident on the Island for the last five years?

Applicant:

Yes

No

Joint applicant:

Yes

No

Do you have permanent employment on the Island and have been in continuous employment for a minimum of 2 years?

Yes

No

Do you have close family who have lived continuously for the last five years on the Island? (close family being mother, father, siblings or adult children):

Yes

No

| Name | Address | Relationship to applicant | How long they have lived on the Island |
|------|---------|---------------------------|--|
| | | | |
| | | | |
| | | | |

Are any members of your household currently serving in the HM Forces or have been discharged in the last 5 years? Yes No

Are any members of your household currently serving in the reserve forces or have been discharged in the last 5 years? Yes No

Are you due to cease occupying or be entitled to MOD Accommodation following the death of your spouse/civil partner? Yes No

If you have no local connection to the Island, are there any exceptional circumstances for your application to be accepted? Yes No

Please provide details in the box on the next page.

Please note that you will be required to evidence that you have a local connection and are eligible to join Island HomeFinder. Examples of the types of documents that may evidence this can be found at the end of this form.

What type of property would you want to be considered for?

- | | | |
|-------------------------------------|---|--|
| <input type="checkbox"/> Bedsit | <input type="checkbox"/> Bungalow | <input type="checkbox"/> Studio |
| <input type="checkbox"/> Maisonette | <input type="checkbox"/> Flat | <input type="checkbox"/> Older persons housing |
| <input type="checkbox"/> House | <input type="checkbox"/> Disabled adapted | |

Would you be interested in being considered for extra care properties?

Extra care properties are only eligible for persons who are 55 or persons who are 45 and over and who have a learning disability. Further information can be found at www.islandhomefinder.org.uk/content/IslandIndependentLiving

Yes No

Where would you like to live?

Please tick any areas that apply. This information will help the Isle of Wight Council and its partners plan for the future. Once you are registered on Island HomeFinder, you can register your interest or bid for any properties in any area you like.

- | | | |
|--|---|--|
| <input type="checkbox"/> Arreton | <input type="checkbox"/> East Cowes | <input type="checkbox"/> Newport - Hunnyhill |
| <input type="checkbox"/> Bembridge | <input type="checkbox"/> Freshwater | <input type="checkbox"/> Newport - Mountjoy |
| <input type="checkbox"/> Binstead | <input type="checkbox"/> Godshill | <input type="checkbox"/> Newport - Pan |
| <input type="checkbox"/> Brading | <input type="checkbox"/> Havenstreet | <input type="checkbox"/> Newport - Parkhurst |
| <input type="checkbox"/> Brighstone | <input type="checkbox"/> Lake | <input type="checkbox"/> Newport - Shide |
| <input type="checkbox"/> Calbourne | <input type="checkbox"/> Nettlestone | <input type="checkbox"/> Niton and Whitwell |
| <input type="checkbox"/> Carisbrooke | <input type="checkbox"/> Newchurch | <input type="checkbox"/> Northwood |
| <input type="checkbox"/> Chale/Chale Green | <input type="checkbox"/> Newport - Central | <input type="checkbox"/> Rookley |
| <input type="checkbox"/> Cowes | <input type="checkbox"/> Newport - Gunville | <input type="checkbox"/> Ryde - Central |

Continued overleaf

- | | | |
|--|--|---|
| <input type="checkbox"/> Ryde - Elmfield | <input type="checkbox"/> Shanklin | <input type="checkbox"/> Whippingham |
| <input type="checkbox"/> Ryde - Haylands | <input type="checkbox"/> Shorwell | <input type="checkbox"/> Winford/Apse Heath |
| <input type="checkbox"/> Ryde - Oakfield | <input type="checkbox"/> St Helens | <input type="checkbox"/> Wootton |
| <input type="checkbox"/> Ryde - Weeks | <input type="checkbox"/> Totland | <input type="checkbox"/> Wroxall |
| <input type="checkbox"/> Sandown | <input type="checkbox"/> Ventnor - Central | <input type="checkbox"/> Yarmouth |
| <input type="checkbox"/> Shalfleet and Newbridge | <input type="checkbox"/> Ventnor - Upper Ventnor | |

If you would like to be considered for housing in a rural parish, you may have to provide evidence that you have a connection to the parish.

Are you interested in other housing options, for example:

- | | | |
|--------------------------------|------------------------------|-----------------------------|
| Intermediate rented properties | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Part buy/part rent | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Discounted sale | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| HomeBuy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Private rented sector | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Is there anything else you wish to tell us about why you want to move?

Island Homefinder gives you the choice to decide whether you want to be considered for vacant properties that are advertised locally. You do this by bidding for a specific vacancy.

Do you think you will need help to use Island Homefinder to look for and apply for housing?

 Yes No

If yes, we will contact you to discuss how we could help you.

Are you or any member of your household connected to the Isle of Wight Council or one of the housing associations operating on the Island, through the following means:

 As an employee As a councillor or committee member Relative of an employee Relative of a councillor or committee member

Please give their name:

Which of the following ethnic groups do you consider the majority of your household to be?

White

 British Irish Traveller of Irish heritage Gypsy/traveller Any other white background

Asian or Asian British

 Indian Pakistani Bangladeshi Any other Asian background

Mixed

 White and Black Caribbean White and Black African White and Asian Any other mixed background

Black or Black British

 Caribbean Any other Black background African **Chinese** **Any other ethnic background** **I do not wish to answer**

I/we declare that the answers given in this application form are correct to the best of my/our knowledge and belief. I/we understand that incorrect information may invalidate my/our application or result in you taking legal action against me.

You will use the information I/we have provided in order to assess my/our application for housing on the Isle of Wight. You may check some of the information with other sources within the council, housing benefit office, rent offices and other councils or housing associations. You may use the information I/we have provided in connection with this or any other application for housing that I/we have made or may make. You may give some information to other organisations, if law allows this. Information will only be used as long as it is current and relevant to the application.

You may use the information I/we have given to be checked by data matching companies. This will include credit reference agencies who will provide the council with information for the purpose of verifying my/our identity and to verify the information I/we have provided to the council including my/our address history. The information received by the council will not be used in any way that is incompatible with the purpose for which it is being disclosed.

The Isle of Wight Council is the data controller for the purposes of the Data Protection Act 1998 ('the act'). The council will process and hold that information in accordance with principles of the act. The information supplied and held may be disclosable in accordance with the Freedom of Information Act 2000 or Environmental Information Regulations 2004 but the council would only do so having regard to the act and where it is required by law to do so.

I/we know I/we must let the council know about any material change of circumstances that may affect my/our application in writing.

I/we have read the above declarations and agree to abide by them.

I/we declare the information I/we have given on this form is correct and complete.

Signed (Applicant/Applicant's representative)

Date

Signed (Joint applicant [if applicable])

Date

If someone has assisted you in completing this form they should provide details below

Title

Surname

First name(s)

Address

Relationship to applicant(s)

Contact telephone number

Email address

Local connection evidence examples

The following list gives examples of evidence that could be provided to prove local connection to the Isle of Wight. This list is not exhaustive and other forms of evidence could be provided if it clearly proves a connection. Any documents that are provided to evidence a length of time must clearly be dated and only one form of evidence is required if it shows a local connection, although several documents may be accepted if they show a connection over time when combined.

Qualifying person criteria

1. Applicant or joint applicant has lived on the island and has done so for a minimum of five years immediately prior to application (a break of one year will be allowed for returning residents with a minimum five years previous residency). Residency at university, service in the Armed Forces or other reasons for being temporarily away from the applicants principal home on the island who have an intention to return will not be counted as a break in residency)

Examples of evidence for applicant or joint applicant

- Tenancy agreement(s)
- Rent book(s)
- Council tax records
- Benefit agency letters
- Official letters from housing benefit, social services, doctors, hospital, solicitors
- Utility bills
- Bank or credit card letters/statements
- Medical cards
- School records
- Electoral registration

2. Applicant or joint applicant has close family who live on the Island and have done so for at least five years (close family being mother, father, siblings or adult children)

Examples of evidence for close family member

- Tenancy agreement(s)
- Rent book(s)
- Council tax records
- Benefit agency letters
- Official letters from housing benefit, social services, doctors, hospital, solicitors
- Utility bills
- Bank or credit card letters/statements
- Medical cards
- Electoral registration

3. Applicant has a permanent job on the Island and has been in continuous employment for a minimum of two years

Examples of evidence of employment

Wage slips (if they include location of work) dating back at least two years
Official letter from employer

4. There are exceptional circumstances – such as those fleeing domestic violence, those wishing to move closer to relatives to give or receive support on severe medical or welfare grounds where there is no-one else who can give this support; those under the Witness Protection Scheme

Examples of evidence

Any documentation that supports individual circumstances, such as official letters from the Police, Women's Refuge, doctor or specialist etc

5. Service personnel as defined by the Allocation of accommodation: guidance for local authorities in England, chapter 3, Eligibility and Qualification, 3.27 are exempt from requiring a local connection but will be required to evidence their circumstances to confirm their exemption status

PRIVACY NOTICE

The Isle of Wight Council, as data controller, will process your personal information in accordance with the Data Protection Act 1998. The council's Data Protection Officer is Helen Miles and can be contacted by email to information@iow.gov.uk , or by letter to, County Hall, High Street, Newport, IW, PO30 1UD.

We may share your information with:

Council Tax, Housing Benefits, Local Council Tax Support, Supporting People, Adult Social Services, Children's Social Services, Strengthening Families, Housing Renewals and external agencies; for the purpose of processing applications, preventing homelessness, assessing housing need and eligibility for social housing, providing assistance in relation to sustaining accommodation, to maximise individuals income through means of available support, for identifying and providing for support needs and to identify persons responsible for the recovery of any Council debts.

Please note that the Council may share your information in the absence of consent, for the purpose of crime prevention or detection, in accordance with the law. To read the full Privacy Notice please visit <http://www.islandhomefinder.org.uk/Data/ASPPages/1/146.aspx>.