

OFFICE USE ONLY

Date received:

Acknowledged:

Inputting Officer:

Date logged:

Application No:

Housing
Options

HOUSING APPLICATION

Please refer to the booklet “How to Complete the Application Form” when completing this form and provide as much information as possible as this will help us to assess your points accurately. If you need any advice or assistance in completing this form, help is available free of charge from Housing Needs but you may have to make an appointment (details are provided in the information pack). An incomplete application form will result in a delay in processing your application. Please use block capitals when completing the form.

Personal details



This symbol means further information/assistance is provided in the booklet “How to Complete the Application Form”.

Q1 About you



Mr/Mrs/Miss/Ms? (please delete)

Last name

First name(s)

Date of birth

 / /

Your current address / or a contact address

Postcode

Date moved in

Please give contact telephone number

National Insurance number

Next of kin

Name

Telephone

Q2 Joint applicant



Mr/Mrs/Miss/Ms? (please delete)

Last name

First name(s)

Date of birth

 / /

Your current address / or a contact address

Postcode

Date moved in

Please give contact telephone number


National Insurance number

Next of kin

Name

Telephone

Q3 Have you lived in this country continuously for the past 5 years? Yes No

Q4 Do you have a local connection to the district? (please tick) 
 Yes No please go to Q5

Please give details of your local connection (name, address, relevant dates of residency/employment, etc). **Local connection eligibility criteria is detailed in the booklet "How to Complete Your Application Form".**

Current resident

Previous resident

Family who live in the area (please give full details of their names, addresses and relationship to you)

Employment

Your household



Q5 Please give details of everyone who needs housing with you

Other adults (if applicable)

Name

Date of birth

Male

Female

Relationship with you? eg. Mother, son, etc.

Do they live with you?

Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons?

Yes No

If yes, please give more details at Q34

Other adults

Name

Date of birth

Male

Female

Relationship with you? Eg. mother, son, etc.

Do they live with you?

Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons?

Yes No

If yes, please give more details at Q34

Continue on the back page if you need more space for other adults

Are you, or any of those people to be rehoused with you expecting a baby?

Yes No

What is their name?

When is the baby due?

Please send confirmation of pregnancy from a doctor with this form or your application may be delayed.

Q5 Your household (continued)

Please give details of children who need housing with you.

Children (child one)

Last name

First name(s)

Date of birth

 Male Female

Relationship with you? eg son, daughter

Do they live with you? Yes No

Visit under an access arrangement
(Please enclose confirmation of the arrangement) Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons? Yes No

If yes, please give more details at Q34

Children (child two)

Last name

First name(s)

Date of birth

 Male Female

Relationship with you? eg son, daughter

Do they live with you? Yes No

Visit under an access arrangement
(Please enclose confirmation of the arrangement) Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons? Yes No

If yes, please give more details at Q34

Children (child three)

Last name

First name(s)

Date of birth

 Male Female

Relationship with you? eg son, daughter

Do they live with you? Yes No

Visit under an access arrangement
(Please enclose confirmation of the arrangement) Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons? Yes No

If yes, please give more details at Q34

Children (child four)

Last name

First name(s)

Date of birth

 Male Female

Relationship with you? eg son, daughter

Do they live with you? Yes No

Visit under an access arrangement
(Please enclose confirmation of the arrangement) Yes No

If they live elsewhere, why can't they live with you now?

Do they need a bedroom of their own for medical reasons? Yes No

If yes, please give more details at Q34

If you need to list more children who need housing with you, please use the space provided on the back page

Q6 People NOT to be rehoused with you



Last name

First name(s)

Date of birth

Relationship to you?

Sex

Male

Female

Last name

First name(s)

Date of birth

Relationship to you?

Sex

Male

Female

Last name

First name(s)

Date of birth

Relationship to you?

Sex

Male

Female

Please detail any other people not to be rehoused with you on the back page

Previous homes



Q7 Your previous homes in the last 5 years? *(your current address should be given at Q1)*

Starting with the most recent address, please tell us where you have lived in the last 5 years and who owned the property, eg. private landlord, Council, Housing Association, parents. If you need more space please continue on the back page.

Property One

Address

Date from

Date to

What was the landlord's name and address?

Why did you leave?

Property Two

Address

Date from

Date to

What was the landlord's name and address?

Why did you leave?

Property Three

Address

Date from

Date to

What was the landlord's name and address?

Why did you leave?

Property Four

Address

Date from

Date to

What was the landlord's name and address?

Why did you leave?

Continue on the back page if you need more space

Q8 Previous Council or Housing Association tenancies

Have you, or anyone included in this application, ever lived in a Council or Housing Association property not already mentioned in Q7?

Property address and date of residence

Date from

Date to

What was the landlord's name and address?

Why did you leave?

Continue on the back page if you need more space

Q9 Who should we contact?



Is there anyone we can speak to on your behalf to support your application? This could be a social worker, care assistant, friend or relative. Please give their details.

Last Name

First name(s)

Contact address

Contact telephone number

Relationship to you

Q10 Details of any convictions



If you or anyone included in this application has ever been convicted of a criminal offence, or been involved in any inappropriate activity such as anti-social behaviour, please give details.

Name

Date of offence

Details

Q11 Savings / investments



If you or anyone who needs housing with you has any savings or investments you should enter the value below.

£

Copies of documents to confirm this should be submitted with your application (eg. Bank statements)

Your current home

Q12 What type of home do you live in now?

Please tick any box which applies

House

Flat

Bungalow

Maisonette

Mobile home

size

Bed and Breakfast

(specify feet or metres)

Bedsit

Shared House

Hostel

Other (please specify)

Q13 What floor is your current accommodation on?

Please tick any box which applies

Ground

First

Second

Other (please specify)

Q14 Are you, or anyone wishing to be rehoused with you, the owner or tenant of your home?



Please tick any box which applies

The owner go to Q15

The tenant go to Q16

Q15 What is the current value of your home?



£

Please attach a written valuation (can be provided by an Estate Agent or Valuer)

How much mortgage is outstanding?

£

Please provide a mortgage statement to confirm this figure

Please state why you can't live there

Continue on the back page if you need more space

Q16 If you are a tenant ...

Please give the name, address and telephone number of your current landlord. We may contact them.

Landlord's name

Landlord's address

Postcode

Landlord's telephone number

Are you in arrears with your rent?

Yes No

If yes, how much is outstanding?

If your tenancy is for a fixed period, when does it expire?

Q17 If you have been asked to leave your present accommodation, please give details ...



What is the date you have to leave by?

Who asked you to leave?

Why do you have to leave?

About your present home

Q18 What type of amenities do you have?

Tick 'yes' or 'no'

Yes

No

Living Room

Dining Room

Separate Kitchen

Separate Bathroom

Inside Toilet

Outside Toilet

Cooking Facilities

Bath or Shower

Wash Hand Basin

Hot Water Supply

Cold Water Supply

Q19 Do you share any of these rooms with someone NOT being rehoused with you?



Tick 'yes' or 'no'

Yes

No

Living Room

Dining Room

Kitchen

Bathroom

Toilet

Q20 How many bedrooms are there in your home? Please tick single or double and whether it is for you/your family's sole use.

Single

Double

Sole use

Bedroom 1

Bedroom 2

Bedroom 3

Bedroom 4

Q21 Do you have a garden/enclosed yard?

Yes

No

Q22 Is there any heating in your home?

Yes


No

What type of heating do you have?


Q23 Is your home in a poor state of repair? Yes No 

If yes, please give details

About the home you want

Q24 What type of home do you require? *Please tick any box which applies* 

- House
- Bungalow (see notes)
- Maisonette
- Bedsit
- Flat - any floor
- Flat - ground floor only (see notes)
- Adapted accommodation
(please specify nature of adaptations required, eg. Grab-rails, ramped access)

Q25 How many bedrooms do you need? 

Please specify the minimum number of bedrooms you would be prepared to accept.

Q26 If you are a Council tenant do you want to join the Mutual Exchange List? 

Yes No

Q27 Do you require accommodation with a warden service?
(This is normally only available for the elderly)


Yes No

Q28 Do you, or anyone who needs housing with you, have a financial interest in any other property? Yes No

If yes, what is the approximate value of the property?
(Evidence will be required of the nature and value of your interest)

£

Reason for application

Q29 Do you consider yourself to be vulnerable due to any of the following? 

- Domestic Violence Learning Difficulties
- Leaving Care Mental Illness
- Physically Disabled Elderly/Frail

If you have ticked any of these boxes, please give further details below at Q31.


Q30 Applicants with additional support needs

Some people may need additional support to enable them to live independently, eg assistance with budgeting, understanding correspondence, shopping.

Do you think you will need additional support if the Council is able to make you an offer of accommodation?

Yes No

If yes, please give further details at Q31.

Q31 Please state why you are applying to the Council for housing? 

You should use the space below to support your application and continue on the back page if necessary. This will enable the Council to decide whether or not you qualify for any additional social/welfare points.

Continue on the back page if necessary

About where you want to live ...



Q32 Please enter 1, 2, 3 in your top 3 areas of choice and indicate any other areas you are interested in with a tick. The more areas you choose, the greater your chances of being housed. If you have a local connection to any of the areas shown, please indicate with a * and give details at Q4. **If you require sheltered housing please go to Q33.**

01 Harrogate

- | | | |
|-------|---|--------------------------|
| 01011 | Harewood
Newby
Bramham
Markenfield | <input type="checkbox"/> |
| 01012 | Lichfield
Norwich
Lincoln | <input type="checkbox"/> |
| 01013 | Harlow/Otley Road
(housing association) | <input type="checkbox"/> |
| 01020 | Oakdale | <input type="checkbox"/> |
| 01031 | Woodfield | <input type="checkbox"/> |
| 01032 | Dene Park | <input type="checkbox"/> |
| 01033 | County | <input type="checkbox"/> |
| 01034 | Skipton Road | <input type="checkbox"/> |
| 01035 | New Park | <input type="checkbox"/> |
| 01036 | High Harrogate/
Devonshire (housing association) | <input type="checkbox"/> |
| 01041 | St Andrews | <input type="checkbox"/> |
| 01042 | Fairfax
Walworth
Cawthorn | <input type="checkbox"/> |
| 01043 | Eleanor &
Wetherby Road | <input type="checkbox"/> |
| 01044 | Knaresborough Road
Hospital Site (housing association) | <input type="checkbox"/> |
| 01045 | Forest Moor
(housing association) | <input type="checkbox"/> |
| 01050 | Starbeck | <input type="checkbox"/> |
| 01060 | Central | <input type="checkbox"/> |
| 01070 | Oatlands/Pannal/
St Georges/Boulevards
(some housing association) | <input type="checkbox"/> |

02 Knaresborough & Scriven

- | | | |
|-------|-----------|--------------------------|
| 02010 | Briggate | <input type="checkbox"/> |
| 02030 | Stockwell | <input type="checkbox"/> |
| 02040 | Inman | <input type="checkbox"/> |
| 02050 | Central | <input type="checkbox"/> |
| 02060 | Charlton | <input type="checkbox"/> |
| 02070 | Manor | <input type="checkbox"/> |
| 02940 | Scriven | <input type="checkbox"/> |

03 Ripon

- | | | |
|-------|------------|--------------------------|
| 03010 | Lead Lane | <input type="checkbox"/> |
| 03020 | Holmefield | <input type="checkbox"/> |
| 03030 | Northern | <input type="checkbox"/> |
| 03040 | Central | <input type="checkbox"/> |

04 Boroughbridge

- | | | |
|-------|----------------|--------------------------|
| 04270 | Cundall | <input type="checkbox"/> |
| 04460 | Skelton-on-Ure | <input type="checkbox"/> |
| 04470 | Kirby Hill | <input type="checkbox"/> |
| 04630 | Roelcliffe | <input type="checkbox"/> |
| 04640 | Boroughbridge | <input type="checkbox"/> |
| 0464L | Langthorpe | <input type="checkbox"/> |
| 0464M | Minskip | <input type="checkbox"/> |

05 Knaresborough Villages

- | | | |
|-------|--------------|--------------------------|
| 05101 | Goldsborough | <input type="checkbox"/> |
| 05102 | Flaxby | <input type="checkbox"/> |
| 05700 | Staveley | <input type="checkbox"/> |
| 05780 | Arkendale | <input type="checkbox"/> |
| 05830 | Scotton | <input type="checkbox"/> |
| 05850 | Ferrensby | <input type="checkbox"/> |

06 Vale of York

- | | | |
|-------|--------------------|--------------------------|
| 06102 | Marion-cum-Grafton | <input type="checkbox"/> |
| 06103 | Green Hammerton | <input type="checkbox"/> |
| 06104 | Nun Monkton | <input type="checkbox"/> |
| 06110 | Hunsingore | <input type="checkbox"/> |
| 06113 | Kirk Hammerton | <input type="checkbox"/> |
| 06115 | Moor Monkton | <input type="checkbox"/> |
| 06720 | Lower Dunsforth | <input type="checkbox"/> |
| 06800 | Great Ouseburn | <input type="checkbox"/> |
| 06880 | Little Ouseburn | <input type="checkbox"/> |
| 06960 | Whixley | <input type="checkbox"/> |

07 Lower Wharfedale

- | | | |
|-------|----------------------------|--------------------------|
| 07121 | Follifoot | <input type="checkbox"/> |
| 07122 | Little Ribston & Spofforth | <input type="checkbox"/> |
| 07135 | North Deighton | <input type="checkbox"/> |
| 07136 | Kirk Deighton | <input type="checkbox"/> |
| 07141 | Kirkby Overblow | <input type="checkbox"/> |
| 07149 | Sicklinghall | <input type="checkbox"/> |

08 Upper Wharfedale

- | | | |
|-------|---------------------|--------------------------|
| 08106 | Fewston | <input type="checkbox"/> |
| 08107 | Norwood | <input type="checkbox"/> |
| 08131 | Askwith | <input type="checkbox"/> |
| 08140 | Newall with Clifton | <input type="checkbox"/> |

09 Lower Nidderdale

- | | | |
|-------|-----------------|--------------------------|
| 0961S | Shaw Mills | <input type="checkbox"/> |
| 0961T | Bishop Thornton | <input type="checkbox"/> |
| 09820 | Nidd | <input type="checkbox"/> |
| 09910 | Birstwith | <input type="checkbox"/> |
| 09920 | Hampsthwaite | <input type="checkbox"/> |
| 09930 | Killinghall | <input type="checkbox"/> |

10 Upper Nidderdale

- | | | |
|-------|----------------|--------------------------|
| 10170 | Lofthouse | <input type="checkbox"/> |
| 1049G | Glasshouses | <input type="checkbox"/> |
| 1049P | Pateley Bridge | <input type="checkbox"/> |
| 10660 | Summerbridge | <input type="checkbox"/> |
| 10900 | Darley | <input type="checkbox"/> |

11 Masham Area

- | | | |
|-------|--------|--------------------------|
| 11030 | Masham | <input type="checkbox"/> |
|-------|--------|--------------------------|

12 Pannal Villages

- | | | |
|-------|---------------|--------------------------|
| 12001 | Beckwithshaw | <input type="checkbox"/> |
| 12002 | North Rigton | <input type="checkbox"/> |
| 12003 | Weeton & Huby | <input type="checkbox"/> |

13 Marston Villages

13001	Tockwith	<input type="checkbox"/>
13002	Long Marston & Hutton Wandesley	<input type="checkbox"/>
13003	Bilton in Ainsty & Bickerton	<input type="checkbox"/>
13004	Wighill	<input type="checkbox"/>

14 Northern Villages

14001	Baldersby	<input type="checkbox"/>
14002	Wath	<input type="checkbox"/>
14003	Melmerby	<input type="checkbox"/>
14004	Hutton Conyers	<input type="checkbox"/>
14005	Nunwick	<input type="checkbox"/>
14006	Rainton	<input type="checkbox"/>
14007	Asenby	<input type="checkbox"/>
14008	Dishforth	<input type="checkbox"/>
14009	Sharow	<input type="checkbox"/>
14010	Copt Hewick	<input type="checkbox"/>
14011	Marton-le-Moor	<input type="checkbox"/>
14012	Bridge Hewick	<input type="checkbox"/>

15 Ripon South Villages

15001	Markington	<input type="checkbox"/>
15002	Bishop Monkton	<input type="checkbox"/>
15003	Burton Leonard	<input type="checkbox"/>
15004	South Stainley	<input type="checkbox"/>

16 Ripon West Villages

16001	North Stainley	<input type="checkbox"/>
16003	Kirkby Malzeard	<input type="checkbox"/>
16004	Winksley	<input type="checkbox"/>
16005	Sawley	<input type="checkbox"/>
16006	Littlethorpe	<input type="checkbox"/>



Sheltered Housing



Q33 The Council also has sheltered housing for elderly people and people who may have a disability/require additional support. This accommodation benefits from the presence of a warden (either residential or non-residential), who can visit tenants daily if required. The accommodation is also linked to the Community Alarm System, with emergency pull-cords located in each room. In order to qualify for this accommodation you must be able to demonstrate that you need the warden service. This may mean a home visit from the Council prior to allocating you a property, to assess your needs.

If you are interested in sheltered housing and do need some additional support (regardless of your age) or if you are 60 or over, please can you provide brief details of your support needs below.

Please can you also indicate below with a the sheltered schemes which you would like to be considered for.

Harrogate

01S01	Station View, Starbeck	<input type="checkbox"/>
01S02	Spa Mews, Starbeck	<input type="checkbox"/>
01S03	Fairfax Avenue	<input type="checkbox"/>
01S04	Wedderburn Road	<input type="checkbox"/>
01S05	Dene Park	<input type="checkbox"/>
01S06	Alder Road	<input type="checkbox"/>
01S07	Woodfield Square	<input type="checkbox"/>
01S08	Carlton Lodge	<input type="checkbox"/>

Knaresborough

02S09	Windsor Lane	<input type="checkbox"/>
02S10	Hewitson Court	<input type="checkbox"/>
02S11	Collins Court	<input type="checkbox"/>
02S12	Manor Court	<input type="checkbox"/>
02S13	Stockwell Grove/ Frogmire Road & Drive	<input type="checkbox"/>
02S14	Charlton Drive/ Manor Gardens	<input type="checkbox"/>

Ripon

03S15	Bondgate Court	<input type="checkbox"/>
03S16	Blossomgate Court	<input type="checkbox"/>
03S17	Russell Dixon Square	<input type="checkbox"/>

Villages and surrounding district

11S18	Maple Creek & Swinburn Road, Masham	<input type="checkbox"/>
16S19	Mowbray Crescent & High Street, Kirkby Malzeard	<input type="checkbox"/>
10S20	Nidd Walk & Southlands, Pateley Bridge	<input type="checkbox"/>
10S25	Netherdale, Pateley Bridge (housing association)	<input type="checkbox"/>
10S21	Lupton Close, Glasshouses	<input type="checkbox"/>
10S22	Valley Road, Darley	<input type="checkbox"/>
12S23	Kingsway, Weeton	<input type="checkbox"/>
04S24	Springfield, Boroughbridge	<input type="checkbox"/>

Map of Harrogate District

Showing Letting Areas

(see stock list for further details)

1. Harrogate
2. Knaresborough & Scriven
3. Ripon
4. Boroughbridge
5. Knaresborough villages
6. Vale of York
7. Lower Wharfedale
8. Upper Wharfedale
9. Lower Nidderdale villages
10. Upper Nidderdale
11. Masham area
12. Pannal villages
13. Marston villages
14. Northern villages
15. Ripon south villages
16. Ripon west villages



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Q34 Medical factors

Please give details of yourself or anyone wishing to be housed with you who is suffering from a serious illness or disability that is being affected by your accommodation.

First Person

Last name

First name(s)

Name and address of Doctor

Details of illness / disability and reasons why your current accommodation is no longer suitable

Second Person


Last name

First name(s)

Name and address of Doctor

Details of illness / disability and reasons why your current accommodation is no longer suitable

If there are any other people with a medical condition please give details on the back page

Q35 Please indicate when you would be ready to take up an offer of accommodation? 

Q36 Pets 

Do you have any pets?

Yes No

If yes, give details

Previous applications 

Q37 Please give details of previous applications made to the Council

Name of applicant

Address at time of application

Date of application

Application number (if known)

Other Applications


Name of Applicant

Address at time of application

Date of application

Application number (if known)


Housing provider

Q38 Who do you wish your application to be considered by? 


Harrogate Borough Council

Housing Associations

Both

Q39 Would you be interested in a shorthold tenancy with a Housing Association? 

Yes No

Q40 Would you be interested in low-cost home ownership? (tick all that apply) 

Shared Ownership Discounted Home Ownership Homebuy

Connections

Q41 Employees of housing providers

Do you, or anyone in your household, or anyone related to you, work for any of the housing providers you have applied to?

Yes No

If yes, please give their name and who they work for:

Q42 Elected Members or members of staff

Are you, or any member of your household, related to any Harrogate Borough Council Elected Member, or member of staff?

Yes No

If yes, please give their name and relationship to you:

Name of relative

Relationship to you

Declaration



Q43 Please read this declaration carefully then sign it. If you are applying jointly please give both signatures.

- I/we consent to the Council obtaining/releasing information to other landlords/landlords' agents/professional housing organisations/government agencies/medical professionals if necessary relating to my/our application.
- I/we explicitly consent for the North Yorkshire Police to disclose details for my previous criminal convictions, details of any risk assessments carried out by the Police, or identify agencies that the Police are aware of having carried out risk assessments in relation to me, and any information that the Police may have relevant to future crime prevention and community safety issues relating to me to Harrogate Borough Council for the purpose of permitting them to manage any risk, and reduce potential for future re-offending.
- I/we understand that the information contained on my/our application may be released to the Audit Commission in respect of the National Fraud Initiative to detect fraud against the public purse and the Council may share this information for the same purposes with other organisations which handle public funds.
- I/we understand that if I/we have come to live in this country within the last 5 years, the Council may have to approach the Home Office to check the information I/we have given in this form and to obtain further related information.
- I/we understand that legal action may be taken against any person who obtains accommodation as a result of giving false or misleading information or withholding information which has been asked for.
- I/we will inform the Council in writing if my/our circumstances change.

Applicant's signature

Date

Joint Applicant's Signature

Date

Please use this space to note any additional details to support your application



**Please return this form to the Department of Community Services,
Housing Needs, Victoria Park House, 18 Victoria Avenue, Harrogate, HG1 5QY**