

London Borough of Croydon Housing application change of address form

Section1 – Please tell us about yourself

1.1. Person applying

Surname	Alias (if applicable)	Date of birth
Forename	Surname:	Gender (M = Male F = Female)
Title	Forename	Marital status M=Married S=Single D=Divorced
Middle initial	Middle initial	Ethnic origin (please see groups below)
		National Insurance No.
Home Telephone No.	Work Telephone No.	Mobile No.
Email address		

1.2 Please give employment details about yourself and any person you wish to be a joint tenant.

You	Employed <input type="checkbox"/>	Self employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	Retired <input type="checkbox"/>	Student <input type="checkbox"/>
Joint tenant	Employed <input type="checkbox"/>	Self employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	Retired <input type="checkbox"/>	Student <input type="checkbox"/>

For Official use only

Date received: / / . **Form complete:** Y / N **Ref. No.:** **Reg. Date** / / . **Checked & input by HS**

1.3 Ethnicity - every year we carry out checks to make sure that our services are fair to all different groups of people, whatever their race, or colour, or ethnic origin. The best way of doing this is to find out about the people who apply for housing. Please tick the category in the grid below which best describes your ethnicity.

Asian other	<input type="checkbox"/>	Do not wish to say	<input type="checkbox"/>	Other ethnic background	<input type="checkbox"/>
Bangladeshi – Asian or Asian British	<input type="checkbox"/>	Indian – Asian or Asian British	<input type="checkbox"/>	Mixed – other background	<input type="checkbox"/>
Black or black British African	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Other	<input type="checkbox"/>
Black or black British Caribbean	<input type="checkbox"/>	Mixed – white & Asian	<input type="checkbox"/>	Pakistani – Asian or Asian British	<input type="checkbox"/>
Black other	<input type="checkbox"/>	Mixed – white and black African	<input type="checkbox"/>	White British	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Mixed – white & black Caribbean	<input type="checkbox"/>	White other	<input type="checkbox"/>

This information will be kept confidential and will not affect your application in any way.

1.4 Please give us the full address of where you are living now.

Your address	Your Landlord's name and address:
Postcode:	Telephone number:

1.5 Please tell us what sort of home you are living in now.

House <input type="checkbox"/>	Flat <input type="checkbox"/>	Maisonette <input type="checkbox"/>	Bungalow <input type="checkbox"/>	Room(s) in shared accommodation <input type="checkbox"/>
Sheltered Accommodation <input type="checkbox"/>	Accommodation adapted/ designed for disabled persons <input type="checkbox"/>		Caravan/mobile home <input type="checkbox"/>	Other <input type="checkbox"/>

* **a maisonette** is a self-contained 'flat', usually on two floors, which has its own front door from the outside

• **a sheltered flat** is for elderly people and has a warden 'on call' for emergencies

Date moved in:

1.6 Please tell us about the rooms in the home where you live. If there are additional rooms which are not listed, please add them on the end of the grid.

Please place a tick for every room in your home in the first column and tell us what floor it is on in the second column. Please tick **only one** of the shaded boxes for each room to tell us whether the room is used by only the people on your application, whether you share it with other relatives who are not on your application, or whether you share it with other people who are not your relatives and who are not on your application.

Rooms	Please indicate what rooms are in the home where you are currently living	What floor is the room on? eg basement, ground floor, 1st	I have sole use of this room	I share it with relatives who are not on my application	I share it with people who are not relatives and who are not on my application	Please tick if this room is under 50 sq. ft. or 4.65 sq.mtrs. (see below)
	✓					✓
Bedsit with kitchen facilities						
Bedroom 1						
Bedroom 2						
Bedroom 3						
Bedroom 4						
Bedroom 5						
Living/Dining Rm 1						
Living/Dining Rm 2						
Kitchen						
Bathroom						
Toilet						
Garden						
Lift						
External stairs (how many flights)						
Internal stairs (how many flights)						
Show additional bedrooms/living rooms/facilities						

- 50 square feet is approximately 7ft x 7ft
- 4.65 square metres is approximately 2.16m x 2.16m

1.7 Do you have a correspondence address which is different to the address where you live? Yes No

If yes, give a contact address (mailing)

Address	Postcode
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Section 2 – People applying to live with you

2.1 Please tell us about everyone who is applying to live with you

Surname	First Names	Mr/ Mrs/ Ms/ Miss	Alias	Date of Birth	M/F	Marital Status (please see below)	Ethnicity (please see page 2)	National Insurance No.	Relationship to Applicant (please see page 5)	For Office use only. Pin No.

Marital status:- M=Married, S=Single, D=Divorced

Are you or anybody in this form pregnant? **Y / N**

If yes, please give the following details:

Name

Date baby expected

NB: Please send proof of pregnancy and a copy of the full birth certificate after the birth of the child

Relationship to applicant - please choose one of the following relationships for each person on your application:

Husband	Wife	Partner	Mother	Mother-in-law	Father
Father-in-law	Brother	Brother-in-law	Sister	Sister-in-law	Daughter
Daughter-in-law	Son	Son-in-law	Aunt	Uncle	Niece
Nephew	Grandfather	Grandmother	Grandson	Granddaughter	

- If none of the above apply write **Other**
- Stepson or stepdaughter should be entered as **Son** or **Daughter** respectively

2.2 Do you want your partner to be joint tenant? Yes No

2.3 If anyone listed above is not currently living with you, please tell us why.

Name	Present address	Reason for not living with you

Section 3 - Other information

3.1 Are you (please tick one box)

Owner occupier <input type="checkbox"/>	Renting from private landlord <input type="checkbox"/>	No fixed address <input type="checkbox"/>
Staying with friends <input type="checkbox"/>	Accommodation that the council is providing because you are homeless <input type="checkbox"/>	Staying with friends <input type="checkbox"/>
Staying with relations <input type="checkbox"/>	B&B/Hostel (delete as applicable) <input type="checkbox"/>	In prison/institution/hospital (delete as applicable) <input type="checkbox"/>
In armed forces quarters <input type="checkbox"/>	Tied accommodation (provided with your job) <input type="checkbox"/>	
Accommodation arranged through another local authority <input type="checkbox"/>		Other <input type="checkbox"/>
Please state		Please specify

If you are renting your accommodation, please send us a copy of your tenancy agreement.

Section 4 – Medical information

If you, or a member of your household suffer from any medical condition/disability made worse by your current living accommodation or it makes your home more difficult to live in, you will need to provide full details of medication taken, doctors and hospital appointments. The housing medical adviser will assess the information you provide and recommend whether or not additional priority should be awarded to your application on medical grounds. The housing medical adviser may wish to contact your GP/hospital.

Please indicate who you would prefer us to contact	
<input type="checkbox"/>	Name and address of GP
<input type="checkbox"/>	Name and address of consultant

Consent for contacting your GP/hospital	
Name	
Signature	Date

Please provide details of anyone on your application whose medical conditions you wish to be taken into consideration			
Person name	Details of medical condition	Prescribed medication	How often taken?

Please describe how your current housing affects your medical condition/disability and what difficulties you have at your current accommodation

Attach an additional sheet if necessary

Does your current accommodation have the benefit of any of the following

Stair lift <input type="checkbox"/>	Handrails <input type="checkbox"/>	Special bath <input type="checkbox"/>	Through the floor lift <input type="checkbox"/>
Disabled shower <input type="checkbox"/>	Wide doors <input type="checkbox"/>	Entrance ramp <input type="checkbox"/>	

Do any of the household members use any of the following

Wheelchair in the home <input type="checkbox"/>	Wheelchair outside <input type="checkbox"/>	Assisted oxygen outside the home <input type="checkbox"/>
Assisted oxygen in the home <input type="checkbox"/>	Dialysis machine in the home <input type="checkbox"/>	Dialysis machine in hospital <input type="checkbox"/>

Data Protection Act 1998

The personal information supplied in this form will only be used in accordance with the Data Protection Act 1998. This information will be processed lawfully, fairly and for the purpose(s) it was intended. The partnership may share this information with other councils, housing associations, other social landlords, other government agencies and other bodies administering public funds for the prevention and detection of fraud.

All the information you give us on this form will be placed on the Croydon housing register database. The information will be used to assess your housing need and to place you in the appropriate band on the housing register. The information will be used to assess your suitability to be a tenant under the Housing Act 1996 as amended by the Homelessness Act 2002. It may be seen by Croydon Council, housing associations and other social landlords who could help us rehouse you.

Warning for applicants to Croydon Housing Register

Please note that when making an application for housing it is a criminal offence if you knowingly or recklessly give false information, withhold information or fail to tell the council as soon as possible of any changes in your circumstances which might affect your right to rehousing.

If enquiries show that you have committed such an offence we, or one of our partners can prosecute you. If you are found guilty, you may be fined up to £5,000 and evicted from any accommodation that may have been provided. Where it is discovered that an application was fraudulent, the application will be removed from the register and all waiting time will be lost.

Please read this carefully before signing the Declaration.

Declaration

I/we certify that the information given in this form is correct to the best of my/our knowledge.

I/we understand that a false statement made knowingly or recklessly and/or knowingly withholding information which is required by the council is a criminal offence under the Housing Act 1996, and may result in my/our prosecution. I understand that it may also result in my/our application being removed from the housing register and/or the loss of any tenancy that may have been granted to me/us by the council or a housing association.

I/we undertake to notify the council or housing association of any change in my/our circumstances as declared in this application.

I/we authorise the Croydon housing register partnership to make such enquiries as are reasonably necessary to confirm any details

Main applicant	Joint applicant (if applicable)	Relationship to main applicant
Signed:	Signed	
Date: / /	Date: / /	

Please return this completed form, together with a copy of your tenancy agreement via:



Post:
Housing Register team
London Borough of Croydon
Bernard Weatherill House
8 Mint Walk Croydon
CR0 1EA



Email:
hsg-rehousing@croydon.gov.uk