

Application Number \_\_\_\_\_

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# HOUSING APPLICATION FORM

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**Kingsridge**  
**Cleddans**

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HOUSING ASSOCIATION LIMITED

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KINGSRIDGE CLEDDANS HOUSING ASSOCIATION LTD  
UNIT 2/3 KCEDG COMMERCIAL CENTRE, LADYLOAN PLACE, DRUMCHAPEL, Glasgow G15 8LB  
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## HOUSING APPLICATION FORM

1. PERSONAL DETAILS		
	FIRST APPLICANT	JOINT APPLICANT
TITLE	MR / MRS / MS / MISS	MR / MRS / MS / MISS
FIRST NAME		
SURNAME		
Date of Birth		
National Insurance No.		
Contact Telephone No.		
Mobile Tel. no.		
e-mail address		

2. PRESENT ADDRESS	
ADDRESS OF APPLICANT	ADDRESS OF JOINT APPLICANT (if different)
Post Code:	Post Code:
Correspondence Address (if different)	
	Post code:
<b>Date moved into present address</b>	dd / mm/ yyyy



## 5. CURRENT ACCOMMODATION

How many bedrooms are there at your current address?		
How many SINGLE bedrooms		How many DOUBLE bedrooms
Do you own your own home?	<b>YES</b>	<b>NO</b>
If you own your own home – do you have a mortgage	<b>YES</b>	<b>NO</b>
If you have a mortgage, please state:-		
Name of lender:		
Address of lender		Account Number
Do you rent your home from a Housing Association or Co-operative? (If yes, please give the name and address)	<b>YES</b>	<b>NO</b>
Do you rent your home from a Local Authority (Council)? (If yes, please give the name and address)	<b>YES</b>	<b>NO</b>
Do you rent from a Private Landlord? (If yes, please give the name and address of your landlord)	<b>YES</b>	<b>NO</b>
	<b>YES</b>	<b>NO</b>
Do you have any rent/mortgage arrears (If yes, please state the amount outstanding and any repayment amount)	<b>YES</b>	<b>NO</b>
Amount £	Repayment arrangement	
Do you live with friends or relatives? (If yes, please state what relationship they are to you)	<b>YES</b>	<b>NO</b>
Have you been served with a Notice to Quit?	<b>YES</b>	<b>NO</b>
Do you consider yourself to be homeless?	<b>YES</b>	<b>NO</b>
If you consider yourself to be homeless, have you contacted the local homelessness casework team?	<b>YES</b>	<b>NO</b>

Do you have access to non-resident children – If 'YES' Please state:-		<b>YES</b>	<b>NO</b>
Name(s)	Date of Birth	Residence address	

**5a. CURRENT ACCOMMODATION - TYPE**

What type of property do you live in at present? (please ✓)

Tenement Flat - Ground Floor		1 <sup>st</sup> Floor		2 <sup>nd</sup> Floor		3 <sup>rd</sup> or above		
Maisonette - Ground		Maisonette 1 <sup>st</sup> floor		Maisonette 2 <sup>nd</sup> (or above)				
Multi-storey - Ground		1 <sup>st</sup> – 5 <sup>th</sup> Floor		6 <sup>th</sup> – 13 <sup>th</sup> Floor		14 <sup>th</sup> or above		
Lower Cottage Flat (four in a block)			Upper Cottage Flat					
Terraced House		Semi-detached House			Detached House			
Bedsit		Bedsit (shared accommodation)			Other (please specify)			

5b CURRENT ACCOMMODATION – Please ✓ if you **do not** have any of the following in your current home

w.c <input type="checkbox"/>	Cold water supply <input type="checkbox"/>	Hot water supply <input type="checkbox"/>	Fixed bath or shower <input type="checkbox"/>	Central heating <input type="checkbox"/>	Cooking facilities <input type="checkbox"/>	Living room <input type="checkbox"/>
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**6. REASONS FOR RE-HOUSING**

**please tick ✓ the appropriate box**

Medical condition (affecting your ability or any member of your household to live in your current home)	
Overcrowding	
Underoccupation	
Incoming worker	
Living with family/friends	
Relative in need (required to give or receive support)	
Homelessness	
Harassment/Domestic Abuse	
Relationship breakdown	
Leaving Institutional care	
Other (please state)	

7. ARE YOU OR HAVE YOU BEEN A TENANT OF ANY OF THE FOLLOWING LANDLORDS	please ✓
Cernach Housing Association	
Drumchapel Housing Co-operative	
Kendoon Housing Association	
Kingsridge Cleddans Housing Association	
Pineview Housing Association	
Glasgow Housing Association (GHA)	
If you have been a tenant of any of the landlords, please state the:	
address(no.1): _____  date of leaving: _____  reason for leaving: _____  _____	
address(no.2): _____  date of leaving: _____  reason for leaving: _____  _____	
address(no.3): _____  date of leaving: _____  reason for leaving: _____  _____	

8. HAVE YOU APPLIED TO BE CONSIDERED FOR RE-HOUSING FROM ANY OF THESE LANDLORDS?	please ✓
Cernach Housing Association	
Drumchapel Housing Co-operative	
Kendoon Housing Association	
Kingsridge Cleddans Housing Association	
Pineview Housing Association	

9. WHAT TYPE OF PROPERTY WOULD YOU LIKE TO BE CONSIDERED FOR				please ✓ ALL THAT APPLY	
Flat – Ground floor		Flat – 1 <sup>st</sup> Floor		Flat – 2 <sup>nd</sup> Floor <sup>or</sup> above	
Cottage Flat – Lower		Cottage Flat - Upper		Flat - Main door	
House – End Terrace		House – Mid Terrace		House – Semi Detached	
Wheelchair adapted		Disabled adapted		Any <sup>excluding</sup> wheelchair or disabled	

### 10. WHAT SIZE OF PROPERTY

Bedsit		1 Bedroom		2 Bedrooms	
3 Bedrooms		4 Bedrooms		5 Bedrooms	
6 Bedrooms					

### 11. PLEASE LIST ALL ADDRESS YOU HAVE LIVED IN OVER THE LAST 5 YEARS

ADDRESS 1:

FROM	TO	REASON FOR LEAVING
NAME & ADDRESS OF LANDLORD		

ADDRESS 2:

FROM	TO	REASON FOR LEAVING
NAME & ADDRESS OF LANDLORD		

ADDRESS 3:

FROM	TO	REASON FOR LEAVING
NAME & ADDRESS OF LANDLORD		

## 12. ADDITIONAL INFORMATION: SUPPORT

If you are providing care or support or wish to provide care and/or support to or from a relative within the Drumchapel area please state;

Name of relative:

Address of relative:

I give care and/or support to a relative

I receive care and/or support from a relative

G.P. Name and address:

## 13. FURTHER INFORMATION – please ✓ any that apply

	YES	NO	DON'T KNOW
Have you been convicted of a criminal offence which cannot be regarded as spent as defined within the Rehabilitation of Offenders Act 1974?			
Are you or any person to be re-housed with you subject to the notification requirements set out in the Sexual Offences Act 2003 (commonly known as "being on the sex offenders register" or "registered as a sex offender"?)			
Have you or any person to be rehoused with you been evicted from any property in the last 3 years on the grounds of anti-social behaviour?			
Are you or any person to be rehoused with you subject to an Anti-Social Behaviour Order granted by any court?			
Are you or any person to be re-housed with you subject to any immigration controls			

If you have answered **yes** to any of the above, please provide details:

*All information provided is in strict confidence and may not affect your application.*





## 14. DECLARATION

Are you or any person to be re-housed with you a member of staff or Management Committee Member of Kingsridge Cleddans Housing Association?      **YES**          **NO**   

If yes;

Name of Staff/Management Committee Member:

Relationship to staff or Management Committee Member:

## 15. APPLICANT DECLARATION

I/we understand and confirm that completion of this application is not, binding on any party and does not bind Kingsridge Cleddans Housing Association to provide accommodation to me/us.

I/we consent to and give permission to Kingsridge Cleddans Housing Association to obtain and or share any information from any relevant party for the purposes of verifying the information I/we have provided for the accurate assessment of my/our housing needs and requirements.

I/we confirm that the information provided by me/us, is accurate and a true statement of my/our circumstances at the date of the submission of this application.

I/we confirm should there be any change in circumstances, I/we will inform the housing providers.

I/we accept and agree that any false or misleading information being withheld may result in the following:

1. My/our application being suspended or cancelled
2. The offer of any tenancy being withdrawn
3. Where a tenancy has been granted, Kingsridge Cleddans Housing Association will seek repossession

**APPLICANT SIGNATURE:**

**DATE:**

**JOINT APPLICANT SIGNATURE:**

**DATE:**