

SOUTHSEA SELF HELP HOUSING CO-OPERATIVE

APPLICATION FOR HOUSING

<u>Please read the 'How to Apply Section' on the website carefully before completing this</u> <u>application form.</u> All questions must be completed. (If you require more space please continue on extra sheets)

1. Name of Applicant(s). Please use a separate line for each person seeking a tenancy

Please note that membership and tenancy cannot be granted to anyone under the age of 18. All adults over 18 must complete their own application form this includes single persons wishing to share accommodation with friends, couples and families with children.

1	Date of birth	Nat. Ins. No
2	Date of birth	Nat. Ins. No
3	Date of birth	Nat. Ins. No

2. Current Address

House Number/Street		
Town	_ County	Postcode
Telephone		
Email		

3. Do you have the Right to Reside in the UK?

We will need to see your proof of your Right to Reside in the UK. This is a legal requirement.

What we need is: National Insurance Number and Photo ID, Driving licence or passport for proof of residency and nationality

4. Next of Kin

Name: ______ Tel No: ______

5. Please give the following information about people who will normally be resident with you as one household (i.e. one tenancy agreement). Please include any children-

Name	Relationship to you	Date of Birth	Sex

6. Current Housing Situation (Please tick the most appropriate description)

Private Rented Accommodation	Bed and Breakfast	
Council tenant		
Name of Council	 Living with friends or relatives	
Housing Association tenant Name of Housing Association	Living in a Housing Co-operative Name of Housing Co-operative	
Other (Please describe)		

7. Please describe your current housing situation. Please be as detailed as possible giving for example information on physical conditions (e.g. damp, overcrowding).

Please note that we reserve the right to undertake a home visit to applicant's current address.

8. Why do you wish to leave your current address?

9. a) How long have you lived at your current address?

b) If less than 3 years please give previous address

10. a) Are you on a council waiting list Yes No	
b) If yes, which council's waiting list are you on?	
and how many points do you have?	
11. a) Have you applied to housing organisations other than Southsea Self help regularized current housing situation (please include any councils, housing co-operatives, housing associations, etc)?	
b) If yes, please give details.	
12. a) Have you tried other ways to transfer from your current address? Yesb) If yes, please give details	No 🛄
13. a) Have you applied to Southsea Self Help Housing Co-operative before?	
Yes No	
b) If yes, please give details.	

14. How did you find out about Southsea Self Help Housing Co-operative?

15. a) Are any current members of	of Sou	ithsea Se	elf Help	Housing	g Co-oper	ative kno	wn to you
	Yes		No				
b) If yes, who and in what capacit	ty?						
16. a) Have you ever lived in a Ho	ousing	g Co-ope	rative k	efore?	Yes		No 🗌
b) If yes, please give details.							

17. What is your understanding of a Housing Co-operative and how it works?

18. Please give details of any experience you have of co-operative living, of any voluntary work or any paid work in the Voluntary or Community Sector. Please give the dates for each example (Start and end date) and a contact person for verification (if necessary).

19. Housing Co-operatives are voluntary organisations that rely on the involvement of all of their members. Please give details of how you would be involved in the Co-operative. If you get to the stage where you are offered a property within the co-op (SSHH) this information will be passed to our Membership Support Officer with your contact details so that they can support you in finding the best way to use your skills within the co-operative.

20. Please describe your housing needs.

21. Please provide two references.

To include full name, job title, company name, full postal address, telephone number or email address. The two references required are 1. Current or previous landlord 2. Current employer (This includes voluntary work or another professional)

22. Please provide any additional information that may be relevant to your application.

The information that you provide in this form will be used by SSHH for the purposes of assessing your application to be housed and in giving this information you are granting permission to SSHH to use this information for that purpose and in order to provide services to you.

DECLARATION

I declare that all the information given in this application is true and accurate. I understand that if, at a later date, any of the information is proved to have been false or misleading then any tenancy/membership of Southsea Self Help Housing Co-operative that has been granted will be terminated immediately.

Signed..... Date.....

Please print and return the completed form to THE ALLOCATION OFFICER, SOUTHSEA SELF HELP HOUSING CO-OPERATIVE, <u>57 LUCKNOW STREET, PORTSMOUTH, HANTS</u>. P01 1PT PLEASE DO NOT SEND THIS FORM TO ANY OTHER ADDRESS AS IT WILL NOT BE COLLECTED.