

TRAFALGAR HOUSING ASSOCIATION

No

HOUSING APPLICATION FORM

IMPORTANT : Before completing this form, please read the attached Applicant Advice Leaflet.
Your application cannot be processed unless this form is completed fully.

1. APPLICANT DETAILS

Surname

Forename(s)

Title (Mr/Mrs/Miss/Ms/Other)

Date of Birth

National Insurance No

Address

Postcode

Email

Phone No Home

Mobile

Economic Status

Relationship to joint applicant

2. JOINT APPLICANT DETAILS

Surname

Forename(s)

Title (Mr/Mrs/Miss/Ms/Other)

Date of Birth

National Insurance No

Address

Postcode

Email

Phone No Home

Mobile

Economic Status

Relationship to applicant

PLEASE NOTE: If joint applicant's address differs from the main applicant an application form must be filled out for each address.

3. PERSONS TO BE REHOUSED (list all other persons included in application)

Name	Date of Birth	Sex	Address (if not as above)	Relationship to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If pregnant, please give expected date of confinement

4. REGISTERED OFFENDERS

Are you or anyone who will be rehoused with you required to register with the police?

Please write YES or NO.

5. OTHER PERSONS STAYING AT YOUR ADDRESS (not to be rehoused with you)

Name	Date of Birth	Sex	Relationship to you
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. PRESENT ACCOMMODATION

What is your status at your current address? (Please select appropriate box)

Owner	Tenant	Sub-tenant
Living with immediate family	Living care of relatives/friends	Hostel / B&B
Lodger	Temporary accommodation	Tied accommodation
No Fixed Address	HM Forces	Other

Please give details

Who owns your accommodation?

What type of property is it? (eg house, tenement flat, multi-storey)

How many bedrooms does it have? Double bedrooms Single bedrooms

Does the property have the following?

	YES	NO
Separate kitchen	<input type="checkbox"/>	<input type="checkbox"/>
Separate bathroom	<input type="checkbox"/>	<input type="checkbox"/>
A bath or shower	<input type="checkbox"/>	<input type="checkbox"/>
An inside WC	<input type="checkbox"/>	<input type="checkbox"/>
A fixed hot water supply	<input type="checkbox"/>	<input type="checkbox"/>

When did you move to your present accommodation? Month Year

Is this your only address? (Please write YES or NO)

If no, please give details:

Are you the tenant or owner of any other property? (Please write YES or NO)

If yes, please give details:

7. SHARING AMENITIES

Do you share any of the following amenities in your accommodation?

	YES	NO
Bathroom		
WC		
Livingroom		
Kitchen		

8. PROPERTY CONDITION

Does your accommodation have any serious defects? YES NO

If yes, please give details:

CONFIRMATION OF DEFECTS WILL BE REQUIRED.

9. INSECURITY OF TENURE

	YES	NO
Is your accommodation temporary?		
If yes, is there a threat of you being asked to leave?		
Are you about to be made homeless?		

Please give details:

10. LOCAL SUPPORT

Medical Support

Do you wish to move to the Clydebank area to be near relatives or friends who require care because of illness or disability?

YES	NO
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If yes, please give details of person(s) requiring care:

Name	Age	Address	Relationship to you	Illness/ disability

How frequently do you provide care? (daily/weekly/other)

Do you or anyone included in your application require care because of illness or disability from relatives/friends living in Clydebank area?

YES	NO
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If yes, please give details of person(s) providing care:

Name of person(s) Providing care	Age	Address	Relationship to you	Name of person(s) receiving care

How frequently do you receive care? (daily/weekly/other)

CONFIRMATION OF ILLNESS/DISABILITY AND CARE PROVISION WILL BE REQUIRED.

Child Care Support

Do you wish to move to the Clydebank area for child care, nursery or schooling reasons?

YES	NO
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Name of child	Date of Birth	Nursery/School attended

Do you receive child care from anybody in the Clydebank area?

YES	NO
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If yes, please give details of person(s) providing child care:

Name	Age	Address	Relationship to you	Name(s) of child receiving care

Travel to Work

Are you currently employed?

YES	NO
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Name of Employer

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Address

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Do you wish to move to, or remain in, the Clydebank area to be near your place of work?

YES	NO
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11. OTHER APPLICATIONS

Are you on any other housing waiting lists?

YES	NO
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If yes, please give details:

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Have you ever been disqualified from any housing waiting list?

YES	NO
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If yes, please give details:

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12. PREVIOUS ADDRESSES

Please list all addresses you have lived at since age 16, starting with the most recent.
(Continue on a separate sheet if necessary)

Address	From/To	Status (eg tenant, owner, living care of)	Reason for Moving
	/		
	/		
	/		
	/		

Have you previously had a tenancy of or been the owner of a property?

YES	NO
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Has any action ever been taken against you for non-payment of rent or mortgage, or for any other breach of tenancy (eg anti-social behaviour, non-occupation of property)?

YES	NO
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If yes, please give details:

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13. TYPE OF ACCOMMODATION REQUESTED (Please circle appropriate box)

Number of bedrooms:

1	2	3	4	5
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Type:

Terraced House	Cottage Flat (4 in a block)	Tenement	Any Type
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Floor Height:

Ground	1 st	2 nd	3 rd	Any
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Area:

Trafalgar Area (Dalmuir)	Terraces Area (Radnor Park)	Either Area
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Do you or anyone included in your application have any special housing requirements? (eg wheelchair housing / no stairs etc)

YES	NO
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If yes, please give details:

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MEDICAL PRIORITY

Do you or anyone included in your application have any disability, special need or medical condition which would be helped by a move to another house?

YES	NO
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If yes, please give details:

Name	Disability / Special Need / Medical Condition

If you have answered yes to the above question, you should now contact the Association’s office to obtain a medical assessment form.

Medical points cannot be awarded unless a medical assessment form is fully completed.

Confirmation of any disability, special need or medical condition will be required.

14. SHARED OWNERSHIP / OWNER OCCUPATION

Would you be interested in shared ownership where You buy part and rent part of a property?

YES	NO
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Would you be interested in any modernised or new Build properties for sale at market value?

YES	NO
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15. PERSONAL CONNECTION

The law relating to housing associations places certain restrictions on the letting of houses to members of staff or committee members or to their close relatives.

Are you, or is anyone included in your application, related to a member of staff or committee member of Trafalgar Housing Association?

If yes, please give details of the person(s) you are related to and the nature of the relationship:

Name	Address	Relationship

16. DECLARATION

Please read and sign

I/We hereby certify that all the information supplied is correct and understand that any false or misleading statement or withholding of information (whether written or oral) now or at any subsequent date may result in legal action being taken. I/We agree to notify Trafalgar Housing Association of any changes to my/our circumstances.

Signature of Applicant Date

Signature of Joint Applicant Date

18. CONSENT TO RELEASE OF INFORMATION

I/We hereby give Trafalgar Housing Association permission to obtain information relevant to my/our application for housing.

Signature of Applicant Date

Signature of Joint Applicant Date

IMPORTANT NOTE: CHANGES TO HOUSING BENEFIT AND UNIVERSAL CREDIT HOUSING ELEMENT

From April 2018, entitlement to Housing Benefit or the housing element of Universal Credit will be restricted if you are aged under 35, single and do not have any dependent children living with you. Housing Benefit or the housing element of Universal Credit will be capped at the Local Housing Allowance (LHA) rate that currently applies to private sector tenants and may not be sufficient to cover full rent due. This change applies to tenancies starting on or after 1 April 2016. If you think you could be affected by this change, please contact the association for further information.

PLEASE CHECK THAT YOU HAVE FULLY COMPLETED ALL SECTIONS OF THIS FORM

IF YOU REQUIRE ANY ASSISTANCE OR IF YOU WISH TO DISCUSS YOUR APPLICATION, PLEASE CONTACT THE ASSOCIATION’S OFFICE.

**PLEASE RETURN THE FORM TO: TRAFALGAR HOUSING ASSOCIATION
430A DUMBARTON ROAD
DALMUIR
CLYDEBANK G81 4DX**

TELEPHONE NO: 0141 952 4676

**IF YOU WISH TO RETURN THIS FORM BY EMAIL, PLEASE SEND TO
hm@trafalgarha.co.uk**

EQUAL OPPORTUNITIES MONITORING

Trafalgar Housing Association is committed to equal opportunities and we would like to monitor our performance in this area. We would be grateful if you could assist us by answering the following questions. You do not have to provide this information if you do not wish to. Your application for housing will not be affected by this form.

1. How would you describe your ethnic origin? (please tick ✓)	Applicant	Joint Applicant
(i) White		
Scottish		
Other British		
Irish		
Gypsy / Traveller		
Polish		
Any other white background		
(ii) Mixed or multiple ethnic background		
(iii) Asian, Asian Scottish or Asian British		
Indian		
Pakistani		
Bangladeshi		
Chinese		
Any other Asian background		
(iv) Black, Black Scottish or Black British		
Caribbean		
African		
Any other black background		
(v) Other ethnic background		
Arab, Arab Scottish or Arab British		
Any other ethnic background		
(vi) Unknown		

2. Do you consider yourself to have a disability? (Please write YES or NO)	Applicant	Joint Applicant
If you have answered yes, please specify the nature of your disability by ticking one or more of the following:	Applicant)	Joint Applicant
Mental illness		
Physical disability		

3. What gender are you?	Applicant	Joint Applicant

Trafalgar Housing Association Limited

GDPR Fair Processing Notice

(How we use your personal information)

This notice explains what information we collect, when we collect it and how we use this. During the course of our activities we will process personal data (which may be held on paper, electronically, or otherwise) about you and we recognise the need to treat it in an appropriate and lawful manner. The purpose of this notice is to make you aware of how we will handle your information.

Who are we?

Trafalgar Housing Association Limited, a Scottish Charity (Scottish Charity Number SC038597), a registered society under the Co-operative and Community Benefit Societies Act 2014 with Registered Number 2316RS and having their Registered Office at 430A Dumbarton Road, Clydebank, G81 4DX (“we” or “us”) take the issue of security and data protection very seriously and strictly adhere to guidelines published in the Data Protection Act of 1998 and the General Data Protection Regulation (EU) 2016/679 which is applicable from the 25th May 2018, together with any domestic laws subsequently enacted.

We are notified as a Data Controller with the Office of the Information Commissioner under registration number Z4718035 and we are the data controller of any personal data that you provide to us.

Any questions relating to this notice and our privacy practices should be sent to the Director.

How we collect information from you and what information we collect

We collect information about you:

when you apply for housing with us, become a tenant, request services/ repairs, enter in to a factoring agreement with ourselves howsoever arising or otherwise provide us with your personal details

when you apply to become a member;

from your use of our online services, whether to report any tenancy or factoring related issues, make a complaint or otherwise;

from your arrangements to make payment to us (such as bank details, payment card numbers, employment details, benefit entitlement and any other income and expenditure related information);

from CCTV images captured by our CCTV cameras

We collect the following information about you:

- name;
- address;
- telephone number;
- e-mail address;
- National Insurance Number;
- Demographic information – ethnicity, race, age, date of birth, nationality;
- Share membership number;
- Payment card reference;
- Next of Kin;
- Household members;
- Bank Account details;
- Payment Card Numbers;
- Employment details, taxpayer identification numbers, tax reference codes;
- Medical Information to process an application/transfer application/undertake sheltered duties/process medical adaptation requests;
- Membership details;
- Hearing impairments;
- Health & safety information to process insurance claims;
- Disability;

- Benefits information from DWP/Housing Benefit Department;
- Passport or driving licence numbers;

We receive the following information from third parties:

- Benefits information, including awards of Housing Benefit/ Universal Credit and any overpayments requests
- Payments made by you to us;
- Complaints or other communications regarding behaviour or other alleged breaches of the terms of your contract with us, including information obtained from Police Scotland, Local Authorities or other housing providers;
- Reports as to the conduct or condition of your tenancy, including references from previous tenancies, and complaints of anti-social behaviour;
- Health related information

Why we need this information about you and how it will be used

We need your information and will use your information:

- to enable us to enter a contract with you;
- undertake and perform our obligations and duties to you in accordance with the terms of our contract with you;
- to enable us to supply you with the services and information which you have requested;
- to enable us to respond to your repair request, housing application and complaints made;
- to analyse the information we collect so that we can administer, support and improve and develop our business and the services we offer;
- to contact you in order to send you details of any changes to our services which may affect you;
- for all other purposes consistent with the proper performance of our operations and business, including newsletters, website and our annual report;
- to protect your interests and / or the interest of others;
- to meet our legal obligations; and
- to contact you for your views on our products and services.

Sharing of Your Information

The information you provide to us will be treated by us as confidential and will be processed within the UK/EEA.

We may disclose your information to other third parties who act for us for the purposes set out in this notice or for purposes approved by you, including the following:

- if we enter into a joint venture with or merged with another business entity, your information may be disclosed to our new business partners or owners;
- if we instruct repair or maintenance works, your information may be disclosed to any contractor;
- if we are investigating a complaint, information may be disclosed to Police Scotland, Local Authority departments, Scottish Fire & Rescue Service and others involved in any complaint, whether investigating the complaint or otherwise;
- if we are updating tenancy details, your information may be disclosed to third parties (such as utility companies and Local Authority);
- if we are investigating payments made or otherwise, your information may be disclosed to payment processors, Local Authority and the Department of Work & Pensions;
- if we are conducting a survey of our products and/ or service, your information may be disclosed to third parties assisting in the compilation and analysis of the survey results;
- to obtain legal advice or take legal action;
- to adhere to our statutory requirements to report to the Scottish Housing Regulator and notify the Local Authority in the event of court proceedings being raised to recover possession of a tenancy;
- if you wish to access our Welfare Rights service;
- to allow you to make payment to us through third party organisations;
- to Sheriff Officers, debt collection agencies and tracing agents in connection with any enforcement action;
- if we are processing any insurance claim made against us we will forward the claim to our insurers

Unless required to do so by law, we will not otherwise share, sell or distribute any of the information you provide to us without your consent.

Transfers outside the UK and Europe

We will only store your information will only within the UK and EEA.

Security

When you give us information we take steps to make sure that your personal information is kept secure and safe.

We store your data securely in both electronic and paper format. Where a physical copy of any data is stored it is stored in a locked filing cabinet or drawer. Electronic copies of personal data are stored on our system which is accessed through password entry. Any information transmitted electronically is transmitted securely and password protected where appropriate.

Further information regarding security and storage of data can be found in our Privacy Policy available at our office or by emailing admin@trafalgarha.co.uk

How long we will keep your information

We review our data retention periods regularly and will only hold your personal data for as long as is necessary for the relevant activity, or as required by law (we may be legally required to hold some types of information), or as set out in any relevant contract we have with you.

Our full retention guidelines schedule is available at our office or by emailing admin@trafalgarha.co.uk

Your Rights

You have the right at any time to:

ask for a copy of the information about you held by us in our records;
require us to correct any inaccuracies in your information;
make a request to us to delete what personal data of your we hold; and
object to receiving any marketing communications from us.

If you would like to exercise any of your rights above please contact our Director, Paul McShane at our office or by emailing admin@trafalgarha.co.uk

You also have the right to complain to the Information Commissioner's Office in relation to our use of your information. The Information Commissioner's contact details are noted below:

45 Melville Street, Edinburgh, EH3 7HL

Telephone: 0131 244 9001

Email: Scotland@ico.org.uk

The accuracy of your information is important to us - please help us keep our records updated by informing us of any changes to your email address and other contact details.