



**WOKINGHAM  
BOROUGH COUNCIL**

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	OFFICE USE ONLY
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	OFFICE USE ONLY

# HOUSING APPLICATION FORM

What type of Housing are you applying for (please tick):

<b>General Housing</b>	<input type="checkbox"/>	<b>Sheltered Housing</b>	<input type="checkbox"/>	<b>Supported Housing</b>	<input type="checkbox"/>
	<input type="checkbox"/>	<b>Pitches</b>	<input type="checkbox"/>	<b>Keyworker Housing</b>	<input type="checkbox"/>

<b>EXTRA CARE HOUSING</b>	Please contact the team on 0118 974 6760 to request an Extra Care housing form
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**Please read this page very carefully before you complete the form.**

- Please do not complete this form if you are either a tenant of Wokingham Borough Council, or a Housing Association tenant living within Wokingham Borough - ask for a transfer application form.
- **Please complete every question on the form. If it is not applicable – write NOT APPLICABLE in the space**
- Incomplete forms will be returned to you and will delay your application.
- **Please ensure you provide copies of all relevant documentation as requested**

Before we can make you an offer of housing we may:

- Undertake at least one home visit
- Require evidence of current and previous addresses

**If you or someone you know has difficulty reading this form you can request a large print copy.**

For Office Use Only – Input (initials) and Date

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## SECTION 1: PERSONAL DETAIL

APPLICANT/S:					
Title	Surname	First Name	Sex (M/F)	Date of Birth	Applicant/s
					Main Applicant
					Joint Applicant

PEOPLE TO BE HOUSED WITH YOU/YOUR FAMILY:					
Title	Surname	First Name	Sex (M/F)	Date of Birth	Relationship to you (e.g. daughter/son)

If you are expecting a child please put your expected due date. Include a certificate of proof of pregnancy from your midwife/GP.

YOUR CURRENT ADDRESS:					
				POSTCODE	
Mobile Tel. No		Home Tel. No		Work Tel. No	
Failure to provide a current telephone number where you may be reached during the day may result in you losing offers of housing.					
EMAIL ADDRESS					
PARTNER'S ADDRESS IF DIFFERENT:					
TENURE (FAMILY HOME/OWNER OCCUPIER/TENANT FOR EXAMPLE)					

**ETHNIC ORIGIN** (please identify your household's ethnic origin under a number of broad headings):

British	African	Pakistani	White & Asian
Irish	Bangladeshi	Other Asian background	White & Black African
Traveller of Irish Heritage	Caribbean	Other Black background	White & Black Caribbean
Gypsy/Roma	Chinese	Any other ethnic background	Other mixed background
	Indian	Any other white background	

**WHERE YOU LIVED BEFORE** – ALL applicants give all addresses for the **past 7 years** including the post code & tenancy type:

<i>*Tenancy type: private rent/owner occupier/social housing tenant etc.</i>			TENANCY *	FROM MM/YY	TO MM/YY
Name	Address:				
Name	Address:				
Name	Address:				
Name	Address:				
Name	Address:				

**Please complete this question if you or any member of your family is currently employed by the Armed Services**

Please state the full address that you enlisted from:			
How long were you resident at that address?	From		To
When did you enlist?			

<b>Are you or anyone included in this application subject to immigration control? ***Please include a copy of your immigration documents with this form.</b>	<b>Yes</b>	<b>No</b>	<b>Name of Person/s</b>
An Asylum Seeker (asylum seekers are not eligible to join)?			
An EEA national?			
A person who has limited leave to remain?			
A person given leave to enter the UK for education or employment reasons?			
Someone who normally resides outside the UK?			
Someone on a Spousal Visa			
A person who has arrived in, or returned to the UK in the past 5 years?			

<b>Are you a citizen of (please tick):</b>									
Czech Republic		Bulgaria		Estonia		Hungary		Latvia	
Lithuania		Poland		Romania		Slovakia		Slovenia	
Signed					Date				

**If you answer YES** to any of the above questions you will be required to provide evidence of your immigration status and eligibility for an allocation of housing with this application form.  
**If you have recently arrived in the UK or returned from abroad in the past 5 years** you may be asked to provide proof of status with travel documents, Home Office documents or passport.

**Anti Social Behaviour**

Have you ever lost accommodation or had notice served on you due to anti-social behaviour?	YES		NO	
If yes, please give details:				

**Rent Arrears**

Have you ever had outstanding rent arrears at a former property?	YES		NO	
If yes, please give details and address:				

## SECTION 2: YOUR PRESENT HOME

When did you move in? (dd/mm/yy)			
Current Property Type? (please tick one box)			
<input type="checkbox"/>	House	<input type="checkbox"/>	Caravan
<input type="checkbox"/>	Bungalow	<input type="checkbox"/>	Hotel
<input type="checkbox"/>	Maisonette	<input type="checkbox"/>	Bed & Breakfast
<input type="checkbox"/>	Flat	<input type="checkbox"/>	Hostel
<input type="checkbox"/>	1st Floor Flat	<input type="checkbox"/>	Room only (house in multiple occupation)
<input type="checkbox"/>	Ground Floor/Basement Flat	<input type="checkbox"/>	Lodgings
<input type="checkbox"/>	Bedsit	<input type="checkbox"/>	Prison
<input type="checkbox"/>	Hospital	<input type="checkbox"/>	Street homeless
<input type="checkbox"/>	Mobile Home	<input type="checkbox"/>	Other - please give details
Who owns your current property (full name)?			
If a private landlord, please provide the address of the landlord:			
How many bedrooms are there?		How many bedrooms do you have the use of?	

Are you currently:	YES	NO	YES	NO
Renting from a Private Landlord			Living with Friends	
Renting a Council Property			Living with Family	
In temporary Council accommodation			Tied (e.g. with job)	
Renting from a Housing Association			Her Majesty's Forces	
A Home Owner			Street Homeless or Roofless	

### Sleeping arrangements for each room:

	Name	Age	Relationship to you	Double or Single Room
LIVING ROOM				
1 <sup>ST</sup> BEDROOM				
2 <sup>ND</sup> BEDROOM				
3 <sup>RD</sup> BEDROOM				
4 <sup>TH</sup> BEDROOM				

	YES	NO	YES	NO
Do you have a kitchen?			Do you have hot water?	
Do you share a kitchen?			Do you share hot water?	
Do you have a bathroom?			If you live in a flat, is it upstairs?	
Do you share a bathroom?			If you live in a flat, is it in the basement?	
Do you have a toilet?			Do you have a garden?	
Do you share a toilet?			Do you have a lift?	
Is the toilet outside?			Has your Property been adapted for you?	

If your property has been adapted, please give details:


Do you consider your home to be in disrepair? If so, please state why:

*Should you wish to talk to Environmental Health about any concerns you have with disrepair at your home, please contact them via the main Council number (0118) 974 6000*

**Pets**

Do you have any pets?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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If yes which pets do you have?	<input type="text"/>
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**Please note:**

Many of our properties are not suitable for pets. It is unlikely that permission would be granted for keeping a dog in communal flats, bedsits or maisonettes (including sheltered housing).

Our Housing Association partners rarely allow pets in any properties. By owning a pet you could be restricting the number of properties that can be offered to you.

### SECTION 3: HEALTH AND WELLBEING

Does anyone in your household have an enduring medical condition, disability or enduring mental health illness which is made worse by your housing?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please give their full name, and details of the condition:


**Do you have a Social Worker or any other professional working with you or your family?**

Name	Department
Address	
Telephone Number	

Name	Department
Address	
Telephone Number	

Name	Department
Address	
Telephone Number	

**Sheltered Accommodation**

Would you like information on Sheltered Accommodation? (This is available for those applicants aged 60 and over).	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

## SECTION 4: YOUR INCOME AND YOUR PARTNER'S INCOME

Please ensure you answer all questions on this page to avoid your application being delayed.

	Main Applicant				Joint Applicant/Partner			
<b>NATIONAL INSURANCE NUMBER</b>								

<b>EMPLOYMENT DETAILS</b>								
Are you currently employed?	YES		NO		YES		NO	
Take home pay per month?	£				£			

<b>*BENEFIT ENTITLEMENT</b>	Main Applicant				Joint Applicant/Partner			
Do you receive any benefits?	YES		NO		YES		NO	

<b>If YES, please write in below, the total amount your household receives per month</b>								
Attendance Allowance	£		Job Seekers Allowance	£				
Carer's Allowance	£		Maternity Allowance	£				
Child Benefit	£		Personal Independent Payment	£				
Child Tax Credit	£		Severe Disablement Allowance	£				
Disability Living Allowance	£		War Disablement Benefit	£				
Employment Support Allowance	£		War Widow's Pension	£				
Guardian's Allowance	£		Widowed Parent's Allowance	£				
Housing Benefit	£		Working Tax Credit	£				
Incapacity Benefit	£		Universal Credit	£				
Income Support	£		Other (please detail below*)	£				
Industrial Injuries Benefit	£		*					

<b>*PENSION DETAILS</b>	Main Applicant				Joint Applicant/Partner			
Do you receive an occupational pension?	YES		NO		YES		NO	
If yes, how much per month?	£				£			
Do you receive a state pension?	YES		NO		YES		NO	
If yes, how much per month?	£				£			

<b>*SAVINGS DETAILS</b>	Main Applicant				Joint Applicant/Partner			
Do you have any savings?	YES		NO		YES		NO	
If so, how much savings (total)?	£				£			

<b>*OTHER INCOME DETAILS</b>	Main Applicant				Joint Applicant/Partner			
Do you receive any other income?	YES		NO		YES		NO	
If so what is that income? (example – child support or details of any shares/dividends)								
Amount received per month?	£				£			

## SECTION 5: HOUSING DETAILS

SECTION 5: HOUSING DETAILS	Main Applicant				Joint Applicant/Partner			
	YES		NO		YES		NO	
<b>Do you hold a tenancy for any other property in the UK or elsewhere?</b>								
If yes, please give the address including the postcode								
<b>Have you ever held a Council or Housing Association tenancy in the UK or elsewhere?</b>								
If yes, please give the address								
Landlord Details (Name)								
Dates to / from (dd/mm/yyyy)								
Reason for leaving								
<b>Do you or have you ever own/ed a property in the UK or abroad (including a mobile home)?</b>								
If yes, please give the full address, the date of purchase and date of sale if sold.								
Date purchased (dd/mm/yyyy)								
Date sold (dd/mm/yyyy)								
Amount sold for	£				£			
If not sold, what is the approximate value of the property?	£				£			
<b>Have you have ever owned <u>any other</u> property, UK or abroad (including a mobile home)?</b>								
If yes, please give the full address, the date of purchase and date of sale if sold.								
Date purchased (dd/mm/yyyy)								
Date sold (dd/mm/yyyy)								
Amount sold for	£				£			
<b>Do you have a <u>claim or interest</u> in any property elsewhere (this includes a 2<sup>nd</sup> home whether in the UK or abroad)? Please provide the address.</b>								
What is the approximate value of the property?	£				£			



**Where you want to live - Please tick all the areas you would consider:**

Arborfield		Remenham		Twyford	
Barkham		Ruscombe		Wargrave	
Crowthorne		Shinfield		Whitley Wood	
Earley		Sonning		Winnersh	
Charvil		Spencers Wood		Wokingham	
Finchampstead		Swallowfield		Wokingham Without	
Hurst		Three Mile Cross		Woodley	

**IF YOU TICK AN AREA YOU ARE AGREEING TO RECEIVE AN OFFER IN ANY PART OF THAT AREA.**

<b>Why do you need rehousing?</b>

Do you work for Wokingham Borough Council or any Housing Association	YES		NO	
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Are you related to any member of Wokingham Borough Council or Housing Association staff?	YES		NO	
--	-----	--	----	--

Name		Employer	
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**Please list below, any persons you have given permission to make enquiries on your behalf (e.g. mother):**

Name		Relationship to You	
Address .....		Telephone Number.....	
Name		Relationship to You	
Address .....		Telephone Number.....	

Please provide copies the following to support your application for housing.

✓

<b>PROOF OF IDENTITY</b> <u>and/or</u>	Passport (in full) per household member/ID Card	
	Full Birth Certificate per household member	
	Residence Permit (please supply, if this is applicable)	
<b>PROOF OF TENURE</b> <u>and/or</u>	Mortgage statement/Deeds for any owned property	
	Tenancy/Licence Agreement signed by all parties	
<b>If you are living with family or friends, provide 2 bills or letters with your name and address on*</b>		
<b>PROOF OF RESIDENCY</b> <u>and/or</u>	Council Tax Bill	
	2 bills/letters to your address with your name*	
<b>PROOF OF INCOME</b> <u>and/or</u> <u>and/or</u>	Wage slips (all applicants)	
	Benefit Entitlement Letter/s (main/joint applicants)	
	Pension Entitlement Letter/s (main/joint applicants)	
	Details of Savings (main/joint applicants)	
	Child Benefit letter (pages 1 and 2)	
<b>PROOF OF PREGNANCY</b>	MatB1 certificate from your GP	
<b>OTHER</b>	Please sign and date page 10	
	Please sign and date page 11	

- If you do not provide the correct documentation, this will delay the processing of your application.
- Please mark each copy with your name and address as it appears on the application form.
- Please ensure you complete the form in full.

<b>I hereby authorise Wokingham Borough Council to contact any Agency including my Doctor, Social Worker, Probation Officer or any other organisation connected with my case. I understand that these enquiries are required under the terms of the Housing Act 1996 (Part VI).</b>	
Signed (Applicant) .....	Signed (Partner).....
Date .....	Date .....

WHEN COMPLETED PLEASE RETURN YOUR FORM TO:

**WOKINGHAM BOROUGH COUNCIL  
HOUSING NEEDS TEAM  
PO BOX 154, SHUTE END  
WOKINGHAM, BERKSHIRE  
RG40 1WN**

## DECLARATION – Section 171 of the 1996 Housing Act Part VI

Thank you for completing this Housing Application Form. You must now read and complete this declaration otherwise we will not be able to process your application. **Please remember to notify the Housing Needs team if your circumstances change e.g. a member of your household moves out or you change your address for which you must complete a change to circumstances form.** Other changes include a change of telephone number, birth of a baby for which a copy of the full birth certificate will be required.

**SECTION 171 OF THE HOUSING ACT 1996 STATES IT IS AN OFFENCE FOR ANY PERSON, KNOWINGLY OR RECKLESSLY TO MAKE A FALSE STATEMENT OR TO WITHHOLD INFORMATION REQUESTED, WITH THE INTENTION OF MISLEADING A LOCAL AUTHORITY FOR THE PURPOSE OF OBTAINING SOCIAL HOUSING. THIS INCLUDES FAILURE BY THE APPLICANT TO NOTIFY THE AUTHORITY OF A CHANGE IN CIRCUMSTANCE WHILST IT IS CONSIDERING AN APPLICATION. THE OFFENCE IS PUNISHABLE BY A FINE UP TO LEVEL FIVE (CURRENTLY £5,000).**

- I understand that the information on this form is available to other departments within the Council including the Anti-Fraud Team
- I understand the information provided on this application form may, if appropriate, be given to other Housing providers such as Housing Associations and other Local Authorities
- I understand the information on this form may, if appropriate, be shared with other statutory or non statutory agencies
- I declare that the details given for the purpose of this application are correct
- I declare that I/We have not withheld any information
- I authorise the Council to make necessary enquiries to check information that has been given.
- I have read, or had this document read to me and I understand and agree with the details
- I confirm that the information I have given on this form is true and correct
- I understand it is very important to let the Housing Needs Team know of any changes to circumstances as mentioned above
- I understand that if I give false information you may remove my application from the waiting list or if I have been rehoused, my landlord may take court action to evict me from the property

Applicant 1		Applicant 2	
Name		Name	
Date		Date	
Signature		Signature	

*Your records are held on a computer and kept in accordance with the Data Protection Act 2018.*

*We may share some information across council departments in order to provide a better service to our tenants. We may also provide some information with other organisations, such as other local authorities, private sector companies and contractors, if the law allows this.*