

Terms and conditions

About your housing application

We have asked you to provide information about your household so we can assess your application for re-housing. We also collect this information so we can see how our lettings policy is working.

About your personal data

We will process the information you have provided in this form, and any information that you provide in the future, in line with our obligations under the Data Protection Act 1998.

We collect and process information about you and your household for the following purposes:

- Providing social housing and accommodation;
- Providing associated welfare, advice and support services;
- Supporting our compliance with the Equality Act 2010 (information relating to diversity);
- Safeguarding the health and safety of our employees;
- In order to comply with other legal obligations.

In most circumstances we will not disclose your personal information without your consent.

However there may be situations where it is necessary to share your information with others, where this is the case we will only make disclosures where they are in line with our obligations under the Data Protection Act 1998.

For example, we may need to pass on some information about you to other organisations which support or help you in your tenancy, to contractors who help us carry out our duties as a landlord, or to statutory organisations and local authorities.

- The information you provide in your form will be treated as confidential. It will only be used for the purposes of assessing your application and held securely.

How is my application assessed?

- Your application will be assessed according to our allocations policy based on the answers you provide in the form. This is why it is important for you to complete the form as fully and as accurately as possible, providing any additional information where requested.
- Should you wish to discuss any aspect of our allocations policy or how your application has been assessed, please contact us.
- A Privacy Notice is included with this application form, please keep it for your information and **do not** return it to us.

About your declaration

- ◇ I know that I must let you know about any change in my circumstances that might affect my application for rehousing;
- ◇ I understand that it is an offence to provide fraudulent information and my tenancy will be at risk if it is proved that it was fraudulently obtained;
- ◇ I do not own or have a legal interest in a home elsewhere;
- ◇ No legal action is currently being taken by Radcliffe for any breach of tenancy;
- ◇ I know that filling in this form does not mean I will be offered a home;
- ◇ I understand the Data Protection Statement above and I give you permission to share information if required;

The information I have given is correct and complete.

Under the Data Protection Act you have a right to request a copy of the information held about you.

Please tick to confirm you have read, understood and agree with the terms and conditions (above) of this transfer application.

Signed:

Dated:.....

NAME

ADDRESS:

.....

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TENANCY TRANSFER APPLICATION

Please don't complete this application form if you have any outstanding debt with us, unless:

- You receive Housing Benefit which is paid in arrears;
- You have an agreement to pay the debt and this has been in place for a minimum of 12 weeks during which you have been successfully keeping up payments

Please select the category you believe you're eligible for

Affected by bedroom tax

Overcrowding

Under - occupying

Vulnerable

Independent Living

Where would you MOST LIKE to live

Croydon	2 Bed flats & 3 - 5 bed family houses
Bromley	Studio, 1&2 Bed flats, 1, 2 & 3 bed family houses
Tunbridge Wells	(1&2 bedroom flats)
Lingfield	2 - 3 bed family homes, 1 bed flats
Sevenoaks	1 bed flats
Independent Living	Bromley & Hastings (Studio & 1 Bed flats)

(Circle one)

Your Details

Title: Mr/Mrs/Miss/Other

First Name: Surname:

Marital Status:

Date of Marriage or Civil Partnership (if applicable)

NI Number:Your date of birth:

Home telephone Number:

Work Telephone Number:

Mobile Telephone Number:

Email Address:

MEMBERS OF YOUR HOUSEHOLD

FIRST NAME(S)	SURNAME	RELATIONSHIP	MALE / FEMALE	DATE OF BIRTH

Are you, or anyone included on your application pregnant? YES/NO

Please give details:
.....

Please give details of any person included on your application who is not currently living with you:

Full Name:

Current Address:

Give reason why:

.....

How many spare bedrooms do you have?

.....

How much housing benefit do you currently receive each week?

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Are you experiencing difficulty in living independently, or sustaining your tenancy as a direct result of your individual circumstances?

Yes No

And do you have an illness, medical condition/s or another disability which is made worse by your housing?

Yes No

YOUR HEALTH & PERSONAL NEEDS

Please describe your current state of health? ie Good, poor, etc

If your health problems have been made worse by your current housing give brief details.

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Has your current home been adapted to suit your needs?

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Medical details may need to be checked with your Doctor. Please give details of your Doctors name, address and contact telephone number:

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