

Application form for rental tenancy

(Tick boxes applicable)

1. About your new home

What type of property are you interested in:

☐ Apartment ☐ Bungalow

How many bedrooms would you prefer:

☐ One-bedroom ☐ Two-bedroom

Name of the court or town you are applying for:

Would you be interested in other properties in the same (tick any relevant):

☐ Town ☐ District ☐ County

We offer Retirement Living and Extra Care options. In Retirement Living, you live independently in your own home with support from an on-site manager. In Extra Care, you live in independently in your own home with support from an on-site manager and optional support from an on-site Care Team. Please note, moving to Extra Care is normally based on nominations due to a care need.

Would you prefer:

☐ Retirement Living ☐ Extra Care

Note: Your rent may include service charges, utility charges and a support charge, please speak to the manager at the scheme you are interested in for further details.

2. About you

Applicant 1

Title:	<input type="text"/>	Surname:	<input type="text"/>
First name:	<input type="text"/>		
Middle name:	<input type="text"/>		
Phone no(s):	<input type="text"/>		
Email:	<input type="text"/>		
Date of birth:	<input type="text"/>	NI Number:	<input type="text"/>

Applicant 2

Title:	<input type="text"/>	Surname:	<input type="text"/>
First name:	<input type="text"/>		
Middle name:	<input type="text"/>		
Phone no(s):	<input type="text"/>		
Email:	<input type="text"/>		
Date of birth:	<input type="text"/>	NI Number:	<input type="text"/>

Present address:

Contact details (if not applicant):

Relationship to applicant 1:

Which local authority do you currently live in:

Do you and any additional applicants have the right of residence in the UK? ☐ Yes ☐ No

Are you, or have you been, previously employed by Housing 21? ☐ Yes ☐ No

Are you or anyone living with you related to a Housing 21 employee or Board Member? ☐ Yes ☐ No

If yes please see the section 13 statement at the end.

3. Power of Attorney

Do you have person(s) acting on your behalf as Power of Attorney?

☐ Yes ☐ No

If so please give details and contact number.

A copy of the Power of Attorney needs to be attached to this application.

Name:	
Address:	
Phone No(s):	
Email:	

4. Your present housing

- | | |
|---|---|
| <input type="checkbox"/> Council or housing association tenant | <input type="checkbox"/> Lodging with family or friends |
| <input type="checkbox"/> Current home owner | <input type="checkbox"/> Renting privately |
| <input type="checkbox"/> Are you living in a property that comes with your job? | <input type="checkbox"/> On a council waiting list |
| <input type="checkbox"/> Are you living with friends or family? | <input type="checkbox"/> Current Housing 21 resident |

Other:

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Have you ever previously been a resident of Housing 21?

☐ Yes ☐ No

Please provide the address that you lived at:

	Postcode:	

If you are renting, either privately or through a council or housing association, please provide the full name and address of your landlord.

Name:			
Address:			
		Postcode:	
Phone No:			

If you have lived in your current home for less than five years, please give all previous addresses dating back five years (these references maybe contacted to support your application).

Address 1

Dates: from

to

Address:

Postcode:

Landlord Name:

Address:

Postcode:

Phone No:

Address 2

Dates: from

to

Address:

Postcode:

Landlord Name:

Address:

Postcode:

Phone No:

Address 3

Dates: from

to

Address:

Postcode:

Landlord Name:

Address:

Postcode:

Phone No:

Address 4

Dates: from		to	
Address:			
		Postcode:	
Landlord Name:			
Address:			
		Postcode:	
Phone No:			

Do you own or have a tenancy at any other property? ☐ Yes ☐ No

If so, please give details:

Do you owe rent arrears to a current or former landlord or mortgage arrears? ☐ Yes ☐ No

If yes, please give details:

Have you or anyone in your household been evicted from a property or been subject to possession proceedings within the last three years? Or have you forfeited a probationary, introductory or starter tenancy? ☐ Yes ☐ No

If yes, please give details:

Has action been taken against you or anyone in your household for antisocial behaviour or nuisance in the last three years? This includes warning letters, injunctions, criminal behaviour orders, community protection notices or acceptable behaviour notices? ☐ Yes ☐ No

If yes, please give details:

Do you have any convictions for a criminal offence other than a spent conviction under the Rehabilitation of Offenders Act 1974?

Applicant one: ☐ Yes ☐ No

If yes, please give details:

Applicant two: ☐ Yes ☐ No

If yes, please give details:

Do you have a probation worker?

Applicant one: ☐ Yes ☐ No

If yes, please give details:

Applicant two: ☐ Yes ☐ No

If yes, please give details:

5. Reasons for applying

Please tick the box or boxes which best describe your reasons for applying (See Note 1)

- | | |
|--|--|
| <input type="checkbox"/> Need a smaller property/easier to manage | <input type="checkbox"/> Any type of harassment |
| <input type="checkbox"/> Planning for the future | <input type="checkbox"/> Safety and security |
| <input type="checkbox"/> Relationship breakdown | <input type="checkbox"/> Tenancy has ended/due to end |
| <input type="checkbox"/> Maintenance and upkeep of existing property | <input type="checkbox"/> Homeless or at risk of being homeless |
| <input type="checkbox"/> Broaden social horizons | <input type="checkbox"/> For health reasons |
| <input type="checkbox"/> Need a retirement property | <input type="checkbox"/> Domestic violence |
| <input type="checkbox"/> Relocation | |
| <input type="checkbox"/> Move closer to family | |
| <input type="checkbox"/> Sold my property | |
| <input type="checkbox"/> Affordability of other retirement housing | |

Other reasons (including any disputes with neighbours):

6. Special considerations

Does either applicant have any physical disabilities or other health considerations which make it difficult for you to manage in your present home? (use additional sheet if necessary). (See Note 2)

Applicant 1

Mobility problems:

Other frailty/ health problems:

Care packages presently received:

How many care calls a day do you currently receive?

Applicant 2

Mobility problems:

Other frailty/ health problems:

Care packages presently received:

How many care calls a day do you currently receive?

Do you have any relatives living within the local authority area of choice?
If so, please give details (See Note 3).

7. Equal opportunities

We monitor these categories to ensure that everyone who applies for accommodation is treated equally and fairly and that our policies and procedures comply with legislation. If you do not want to answer these questions, it will not affect your application and will not be used for selection purposes.

Applicant 1

Do you have a disability?

☐ Yes ☐ No ☐ Prefer not to say

What is your sex? (Please use the sex recorded on your birth or gender recognition certificate. A question about gender identity follows).

☐ Male ☐ Female

Is the gender you identify with the same as your sex registered at birth?

☐ Yes ☐ No. Please enter gender identity:

☐ Prefer not to say

What is your sexual orientation?

☐ Heterosexual ☐ Gay ☐ Lesbian ☐ Bisexual
☐ Pansexual ☐ Other ☐ Prefer not to say

What is your religion?

☐ Buddhist ☐ Jewish ☐ No religion
☐ Christian ☐ Muslim ☐ Prefer not to say
☐ Hindu ☐ Sikh ☐ Other

How would you describe your ethnic group?

White

☐ English, Welsh, Scottish, Northern Irish or British Irish
☐ Gypsy or Irish Traveller
☐ Roma
☐ Other

Asian or Asian British

☐ Indian
☐ Pakistani
☐ Bangladeshi
☐ Chinese
☐ Other

Mixed or Multiple Groups

☐ White and Black Caribbean
☐ White and Black African
☐ White and Asian
☐ Other

Black, Black British, Caribbean, or African

☐ Caribbean
☐ African background (please state below)
☐ Other

Other ethnic group

- ☐ Arab ☐ Prefer not to say
- ☐ Any other ethnic group

Applicant 2

Do you have a disability?

- ☐ Yes ☐ No ☐ Prefer not to say

What is your sex? (Please use the sex recorded on your birth or gender recognition certificate. A question about gender identity follows).

- ☐ Male ☐ Female

Is the gender you identify with the same as your sex registered at birth?

- ☐ Yes ☐ No. Please enter gender identity:
- ☐ Prefer not to say

What is your sexual orientation?

- ☐ Heterosexual ☐ Gay ☐ Lesbian ☐ Bisexual
- ☐ Pansexual ☐ Other ☐ Prefer not to say

What is your religion?

- ☐ Buddhist ☐ Jewish ☐ No religion
- ☐ Christian ☐ Muslim ☐ Prefer not to say
- ☐ Hindu ☐ Sikh ☐ Other

How would you describe your ethnic group?

White

- ☐ English, Welsh, Scottish, Northern Irish or British Irish
- ☐ Gypsy or Irish Traveller
- ☐ Roma
- ☐ Other

Asian or Asian British

- ☐ Indian
- ☐ Pakistani
- ☐ Bangladeshi
- ☐ Chinese
- ☐ Other

Mixed or Multiple Groups

- ☐ White and Black Caribbean
- ☐ White and Black African
- ☐ White and Asian
- ☐ Other

Black, Black British, Caribbean, or African

- ☐ Caribbean
- ☐ African background (please state below)
- ☐ Other

Other ethnic group

☐ Arab

☐ Prefer not to say

☐ Any other ethnic group

8. How did you find out about us

How did you find out about Housing 21 or the court?

☐ Local knowledge

☐ Local estate agent

☐ Poster/ leaflet within the

☐ Friends/relatives

☐ Local authority

☐ community

☐ Sign board

☐ Rightmove

☐ Elderly accommodation
council website

☐ Newspaper

☐ Mailing

☐ Website

☐ Digital advert

Other:

9. Statement

I/ We understand that the completion of this form does not guarantee the offer of a property, nor does it commit me/us to the tenancy of a property.

I/ We hereby declare that the information that I/ we have provided in the form accurately reflects my/our current circumstances. The Association is prevented by law from granting a benefit to **Board or committee members, members and staff of the Association or their close relatives except under certain limited circumstances.**

If you are related to any member or officer of the Association please provide details:

Signature(s) Date:

Applicant 1:

Applicant 2:

Note 1 (Section 5) — Information regarding your current housing allows us to assess your need for specialist retirement housing, i.e. level access.

Note 2 (Section 6) — An overview of your current medical condition and any care received will help us assess your need for specialist housing, suitability for the property being applied for and whether Housing 21 or the external care provider are able to meet your medical needs.

Note 3 (Section 6) — Allocation of rental properties require the applicant to already live in or have immediate family currently living within the local authority area.

Data protection

The information supplied on this application form will be used to process your application for a rental tenancy with Housing 21 and to correspond with you. We recognise that your personal information includes sensitive data and we promise to keep your details safe and secure.

We may need to share your information with third parties (previous/ current landlords, the local authority and external care provider (if applicable) for the scheme you are applying for), to help us assess your housing needs and to help us identify the most suitable accommodation that may be available.

I/ We consent to Housing 21 sharing the information on this application form, with the named third parties, for the purpose specified above: **Applicant 1** ☐ **Applicant 2** ☐

We may seek references from the named individuals provided by you, in order to support your application.

I/ We consent to Housing 21 sharing the information on this application form, with named third parties, for the purpose specified above: **Applicant 1** ☐ **Applicant 2** ☐

Where information you supply is of a sensitive nature, such as medical details or information concerning your personal circumstances, it is necessary to give explicit consent for us to be able to process the data. Please indicate your consent by ticking the following box.

I/ We consent to Housing 21 processing the information on this application form for the purpose specified above: **Applicant 1** ☐ **Applicant 2** ☐

All information provided will be processed in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulations.

Your information will be retained only so long as it is legitimately required by us for the purpose of processing of your application and will be dealt with in a proper and lawful way.

We will destroy any information which you ask us to, at any time. We will also promptly destroy any information that is no longer necessary to be kept for the purpose of processing your application. For new sales we shall contact you when all sales have completed to ask if you wish to remain on the resale waiting list or for your details to be destroyed.

I/ We consent to Housing 21 processing my/our information, contained in this application form, for the intended purpose specified above: **Applicant 1** ☐ **Applicant 2** ☐

If at any stage you notice your data is incorrect and want it rectified, if you want it deleted, or if you wish to withdraw your consent to us using or sharing your data please contact our Data Protection Officer at **dataprotection@housing21.org.uk** or write to **Housing 21, Tricorn House, 10th Floor, 51–53 Hagley Road, Birmingham B16 8TP.**

You have the right to complain about any matter relating to our service, including how we use your personal data. In the first instance please contact our Customer Services Team on **0303 192 1622** or email **feedback@housing21.org.uk**

If you are still not happy with the way your complaint, in relation to how we use your personal data, has been dealt with, you may complain to the UK Information Commissioner’s Office (ICO) at www.ico.org.uk. Our ICO registration number is Z5515259. You can find our full Privacy Notice on our website at www.housing21.org.uk

Signature(s) Date:

Applicant 1:

Applicant 2:

Additional information:



Tricorn House,
51–53 Hagley Road,
Birmingham B16 8TP

0370 192 4000

housing21.org.uk



INSIDE
HOUSING



Chartered
Institute of
Housing

UK HOUSING AWARDS 2022

Best older people's landlord

Housing 21 is a leading, not for profit provider of Retirement Living and Extra Care for older people of modest means.

Regulated by the Social Housing Regulator Reg. No. L0055
Community Benefit Society FCA Reg. No. 16791R