

States of Guernsey Housing

Social Rented Housing Application

This pack will tell you how to apply for social rented housing in Guernsey. This pack only is only for applications to States of Guernsey social rented housing – it doesn't include applications for Extra Care Housing, Partial Ownership, or youth housing training flats.

The Application Form Completion Notes will explain how to fill out your Application Form and what some of the words and phrases mean. If you have a question about the Form, you should find the answer in here.

You have to fill out the Application Form and send it back to us along with the documentation we've asked for. By doing that you're formally applying for social rented housing. If you're eligible, we'll add you to the waiting list. If you don't send back all the documentation that you have to, we won't add you to the waiting list and your application will be delayed.

You have to complete every section. If one of the sections doesn't apply to you, put a cross in the box at the top right hand side. If you don't do that, we'll have to call you and it will delay your application.

There's a checklist on the last page – make sure you have sent us everything we need or we won't be able to process your application.

If you require advice or assistance please contact the Allocations Team on 756540.

APPLICATION FORM COMPLETION NOTES

Introduction

Please complete the form clearly using **CAPITAL LETTERS and INK**. The form must be completed fully and accurately and all additional information required must be supplied with the application.

Your application will be considered under the Allocations Policy. If your application is successful, your name will be added to the Waiting List.

1. APPLICANT 1

You must provide all personal information for both Applicant 1 and Applicant 2. Applicant 1 is the person who'll be the primary tenant. That means if we have any questions or need to contact someone in the household, we'll be in touch with them first.

2. APPLICANT 2

Applicant 2 is a joint tenant. That is another adult who'll be equally responsible for the property. Usually Applicant 2 is the spouse or partner of Applicant 1. They will share equal responsibility for the rent, and we will contact them when we can't get in touch with Applicant 1.

3. ABOUT YOUR HOUSEHOLD

Your household is everyone that will be living with you in social rented housing. It includes everyone who will be part of your household within 12 months of being housed, whether they currently live with you or not. 'Household' usually means the tenants and their children who live with them (full time or part of the time).

If you pay for childcare when all parents are working, tell us here.

4. HEALTH

If you have specific housing needs because of the health of someone in the household, we need some information about what kind of health-related needs you have as a household.

5. HOUSEHOLD INCOME

This section covers income (from employment, pensions, benefits, interest, maintenance payments or any other income), savings and investments of which you will have to provide proof of.

Note: The limits on **Income** and **Savings** are set out in the Income Thresholds Policy. We'll make a decision on your net income, but you have to provide us with information about your GROSS income. That means the figure at the top of your payslip, before anything is taken off. You also have to include your wage slips covering the last two months. If you're paid weekly, that means you should send us eight wage slips. If you're paid monthly, send us two.

If you have a salary that changes a lot, please put 'variable' where it asks for your Net Pay. We'll need to ask more questions about your income if that applies.

If you claim a pension, include the details of the amount of money that goes into your bank account. We'll work with you to make sure that we're taking account of the amount of tax you pay. You'll be asked to prove your pension entitlement.

6. SAVINGS AND CAPITAL

We need to know about any savings and investments. That means anything already in your current bank account, in any other accounts you have, and anything like Premium Bonds, stocks, or shares. You have to send us proof of anything you own. Declare any interest that you get from your savings.

You need to include bank statements from <u>all</u> household accounts for the last three months.

If you currently own property, or if you've ever owned property, you need to tell us here and include the details of any sale which has taken place. Please see the Allocations Policy for details on how property ownership may affect your eligibility.

7. ABOUT YOUR CURRENT HOME

In this section you must provide details of your current home, including details of your landlord, type of accommodation and facilities available to you. We need to know how much rent you're charged, and details of any arrears or repayment agreements that you have. This section also covers details of any action taken by your landlord to evict you from the property. You must seek a stay of eviction, if you have been served a Notice to Quit by your landlord. This is because eviction does not mean you will be awarded any priority treatment or even that we will accept your application.

Generally we will not be able to accept an application from you if you are in arrears, you have previously left owing money in connection with a tenancy (say for rent or repairs) or if you have broken the tenancy conditions. If this applies to you, but you believe there are circumstances that we should be aware of you must let us know.

8. PETS

9.

You need to provide details of all animals you wish to be housed with you. We have restrictions on keeping any pet other than:

- Small caged birds (not pigeons).
- Small caged animals, not requiring an import licence.
- Fish in a small aquarium.

ADDITIONAL INFORMATION

Complete this section with any information not covered elsewhere that you would like us to take into consideration when assessing your eligibility for Social Housing.

10. THIRD PARTY CONTACT

By providing Third Party contact details it may assist us in making contact with you at a future date. If we are unable to contact you after making reasonable efforts, your application will be cancelled.

11. DECLARATION

The declaration needs to be read carefully and signed by every Applicant.

Reference No.		
Date of Application		
New Application	Yes	No

APPLICATION FORM

1. PERSON	AL IN	FORMA	TION -	APPLIC	ANT 1			
Mr N	/Irs	Miss	Ms	Other	(please specify)		_
Surname					First Name(s)			
Previous Names including maiden nan					Date of Birth			
Social Security (Number	GY) Residential status (i.e. local, licenced)							
Address including postcode								
Home Telephon	e:		Mobile Telephone: Work Telephone:					
Email address								
Have you lived in	n soci	al rente	d hous	ing in Gu	uernsey previo	usly?	YES	NO
If yes, please provide previous address(es):								
Do you have any						offences?	YES	NO
If yes, please spo	ecify ı	nature a	nd dat	e of con	viction:			

2. PERSONAL INFORMATION - APPLICANT 2								
Mr N	۸rs	Miss	Ms	Other	(please specify)		_
Surname					First Name(s)			
Previous Names including maiden nam					Date of Birth			
Social Security (GY) Residential Number licenced)								
Relationship to Applicant 1								
Address including postcode								
Home Telephon	e:		Mobi	le Teleph	ione:	Work Teleph	none:	
Email address								
Have you lived in	n socia	al rente	d hous	sing in Gu	uernsey previou	usly?	YES	NO
Have you lived in social rented housing in Guernsey previously?YESNOIf yes, please provide previous address(es):								
Do you have any						offences?	YES	NO
If yes, please spe	ecify n	ature a	ınd dat	te of con	viction:			

Surname	First Name(s)			
		Gender	Date of Birth	Relationship to Applicant 1 or 2
,	living with you full-			
confirming your If you don't have a C	custody arrangeme	ents. vide a statement cor	isehold, please provid	
	are costs for any ch	ildren in the hou	isehold, please provid	le details. Include: th

4. HEALTH		
Do any of the people named above have a medical condition, illness, or disability?	YES	NO
If yes, please provide brief details here:		
Have you applied for Extra Care Housing?	YES	NO

5. HOUSEHOLD IN	ICOME			
Are you EMPLOYED ? If yes, please provide details of		APPLICANT 1	YES	NO
and enclose copies of your wage slips covering the last two months.		APPLICANT 2	YES	NO
MAIN JOB	APPLICANT 1		APPLICANT 2	
Job title				
Employers name, address, telephone number, and email address				
Date employment started				
Net Pay	Amount £	Frequency	Amount £	Frequency
Overtime or bonus payments	Amount £	Frequency	Amount £	Frequency
SECOND JOB	APPLICANT 1		APPLICANT 2	
Job title				
Employers name, address, telephone number, and email address				
Date employment started				
Net Pay	Amount £	Frequency	Amount £	Frequency
Overtime or bonus payments	Amount £	Frequency	Amount £	Frequency

Do you receive PENSIONS ? If yes, please provide details of all pensions		APPLICANT 1	YES	NO	
received			YES	NO	
	APPLICANT 1		APPLICANT 2		
Guernsey OAP	£	Weekly	£		Weekly
UK Pensions	Weekly £	Monthly £	Weekly £	£	Monthly
Private Pension	Weekly £	Monthly £	Weekly £	£	Monthly
Employer's Pension	Weekly £	Monthly £	Weekly £	£	Monthly
Other	Weekly £	Monthly £	Weekly £	£	Monthly
Do you receive BENEFITS If yes, please provide details o		APPLICANT 1	YES	NO	
received		APPLICANT 2	YES	NO	
	APPLICANT 1		APPLICANT 2		
Family Allowance	£	Weekly	£		Weekly
Supplementary Benefit	£	Weekly	£		Weekly
Unemployment Benefit	£	Weekly	£		Weekly
Sickness Benefit	£	Weekly	£		Weekly
Invalidity Benefit	£	Weekly	£		Weekly
Rent Allowance	£	Weekly	£		Weekly
Other	£	Weekly	£		Weekly
Do you have any OTHER	INCOME?	APPLICANT 1	YES	NO	
If yes, please provide details o	f all other income	APPLICANT 2	YES	NO	
	APPLICANT 1		APPLICANT 2		
Bank interest/dividends	Monthly £	Annually £	Monthly £	£	Annually
Maintenance Payments	Weekly £	Monthly £	Weekly £	£	Monthly
Other	Weekly £	Monthly £	Weekly £	£	Monthly

6. SAVINGS AND C	APITAL				
Do you have any SAVING INVESTMENTS?		APPLICANT 1	YES	NO	
If yes, please provide details o investments	f all savings and	APPLICANT 2	YES	NO	
	APPLICANT 1		APPLICANT 2		
Amount of savings	£		£		
Value of investments	£		£		
Do you own PROPERTY (DR LAND?	APPLICANT 1	YES	NO	
		APPLICANT 2	YES	NO	
Are you in the process of property or land?	Are you in the process of buying property or land?		YES	NO	
		APPLICANT 2	YES	NO	
Have you previously owr or land?	ed property	APPLICANT 1	YES	NO	
		APPLICANT 2	YES	NO	
If you answered YES to a	ny of the above:				
Address of property					
Value	£				
Date of sale					

7. ABOUT YOUR CURRENT HOME

PRIVATE TENANT	SUB-TENANT	TEMPORARY LET	LIVING W FRIENDS RELATIVI	5/	JOB-TIED TENANT		DDGING HOUSE
BED & BREAKFAST	HM FORCES	SARNIA HOUSING	ACTION F		OF NO FIXE ABODE	D (DTHER:
Landlord name telephone num							
Current rent		£	W	eekly	£		Monthly
Current rates			W	eekly £			Monthly £
Are you in arre	ars? If so, by h	ow much?			£		
If you are in ar	rears, please e	xplain briefly w	hy:				
What kind of p	roportu aro vo	u curronthy livin	og in:				
HOUSE WITH STA	HINTERNAL		IGALOW		FLAT		
BED	SIT	Н	OSTEL		OTHER:		
If you live in a f	lat, bedsit, or	hostel, which fle	oor are you	on?			
BASEMENT	GROU FLOO		T FLOOR		ECOND FLOOR	OT	HER:
Do you current you in social re	•		t be living wi	ith	YES NO		
If yes, how man	ny adults and h	now many child	ren?		adults children		
Does the property have problems with access?					YE	s no	
Does the property have problems with access?					YES NO		

	erty suffer from signifi	icant disrepair?	YES	NO
If yes, please p	provide details:			
Hac dicropair l	been reported to Envir	onmontal Haalth?		
			YES	NO
Has a closure i	notice been issued?		YES	NO
Has your landl	ord issued you with a	Notice to Quit?		
	vide proof with your applica		YES NO	
	n issued with eviction p	YES	NO	
If yes, please prov	vide proof with your applica	ation		
		edrooms used by everyone	e in your currer	nt home, even if
they aren't a r Bedroom	nember of your house	hold		
Rodroom	\mathbf{O}	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		A C
Deditotili	Occupant(s)	If shared, relation occupants to each	•	Age of occupant(s)
1	Occupant(s)		•	-
1	Occupant(s)		•	-
	Occupant(s)		•	-
1	Occupant(s)		•	-
1 2	Occupant(s)		•	-
1 2 3	Occupant(s)		•	-

8. PETS			
Do you have any pets?	APPLICANT 1	YES	NO
	APPLICANT 2	YES	NO
Do you only want to be considered for pr you may keep your pet(s)	roperties where	YES	NO
If you wish to be housed with your pet(s)) you must ask for p	permission from Ho	ousing.

9. ADDITIONAL INFORMATION

Please detail any further information you wish us to consider:

10. THIRD PARTY CONTACT								
Please include the details of someone who is not a member of your household who								
Housing can contact if Applicant 1 and Applicant 2 are unavailable.								
Name		Relationship to you		to				
Name								
Home Telephone:	Mobile Te		elephone:		Work Telephone:			
Address								

11. DECLARATION

I/We declare that the information giving in this application is true, complete and accurate.

I/We undertake to notify you within seven days, and in writing of any change in my/our circumstances that affect the information connected with this application.

I/We give consent for you to contact any States Committee, person or professional named in this application and discuss any part of my/our application.

I/We give consent for you to contact my/our landlord.

I/We confirm that I/we have read and understood the Allocation Policy, Application Form Completion Notes and Pet Policy.

Housing processes personal information in order to carry out the functions of the Committee *for* Employment and Social Security that relate to the provision of accommodation. Information collected will depend on your business with us, but will be no more than is required for that purpose. We may get information about you from others for any of our purposes if the law allows us to do so. We will share information with Social Security and the Guernsey Housing Association to the extent necessary to discharge our responsibilities as co-provider of social rented, sheltered and extra care housing. Any personal information you give to us will be processed in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2001. If you wish to know more about the information we have about you, or about the way we use it, you can ask at the Office *for* Employment & Social Security.

I/We give consent for you to contact my/our employer(s) and/or Social Security to confirm my/our earnings/income (including overtime and bonuses).

I/We understand that if I/we deliberately or recklessly give false information to Housing or withhold information from Housing in connection with this application then:

- my/our name(s) may be removed from the waiting list, and once removed I/we will be barred from reapplication for a period of twelve months;
- any tenancy granted as a result of this application may be terminated and steps to repossess the property taken; and
- I/we may be liable for prosecution and a custodial sentence or fine may be imposed.

I/We understand that incomplete application forms will be returned and that my/our details will not form part of any waiting list for Social Housing until such time all details and documents have been provided.

	APPLICANT 1	APPLICANT 2
SIGNATURE		
PRINT NAME		
DATE		

<u>CHECKLIST</u>

Please confirm that you have enclosed (where applicable) the following information by placing a tick in the right hand box.

Failure to include the information required will result in the Application being returned to you. Your details will not form part of any waiting list for Social Housing until such time all relevant information has been provided.

We can't process your application unless we have everything we need. Please help us by making sure you've included all of the documentation you should.

Make sure that every section has been completed.

1. PERSONAL INFORMATION	APPLICANT 1	APPLICANT 2
Proof of address (a copy of a bank statement or utility bill)		
Proof of residential status		
2. ABOUT YOUR HOUSEHOLD		
A Court Order or signed statement detailing the frequency and		
duration of any visits made by children		
Details of any paid childcare		
3. FINANCIAL INFORMATION	APPLICANT 1	APPLICANT 2
Wage slips showing gross income covering the last two months (i.e.		
eight slips if paid weekly, two if paid monthly)		
Confirmation of all pensions received (paperwork showing who this		
is paid by and the amount received)		
Confirmation of all benefits received (paperwork showing who this		
is paid by and the amount received)		
Confirmation of any other income		
Confirmation of all Savings and Investments		
Bank statements from all bank accounts covering the last three		
months		
4. ABOUT YOUR CURRENT HOME		
Any report or correspondence with you landlord or Environmental		
Health in relation to any significant disrepair that the property		
suffers from		
A copy of the Closure Notice (if applicable)		
A copy of the Notice to Quit (if applicable)		
All paperwork relating to eviction proceedings		
5. PROPERTY OWNERSHIP/TENANCIES		
Full details of any property ownership		