

Please phone us on 01224 423000 if you would like this form in another format or language (including in large print and in Braille).

We can also arrange for a translator to help you understand this form if you need one.

For our use only  
Application number:

Number of Points:

## Langstane Housing Association

# Housing application form

You must fill in all sections of this form so we can give you the correct number of points.

Please contact us if you need help filling in this form.

Langstane Housing Association  
680 King Street  
Aberdeen  
AB24 1SL  
Phone: 01224 423000  
E-mail: [info@langstane-ha.co.uk](mailto:info@langstane-ha.co.uk)  
Website: [www.langstane-ha.co.uk](http://www.langstane-ha.co.uk)

Investors in People Registration number: 1916R(S)  
Registered with Communities Scotland number: HEP 145 AL  
Registered Scottish Charity number: SC01 1754  
We are a member of the Scottish Federation of Housing Associations.



## TENANCY MATTERS

Should you become a tenant of Langstane Housing Association the following information will be useful.



**Rent** - Langstane Housing Association expects its tenants to be up to date with all rent charges. The tenant is always responsible for their rent.



**Properties** - Tenants must keep the properties in good condition.



**Respect for Others** - The Association expects tenants not to act in any anti-social manner or harass others in the neighbourhood of the tenancy.



**Alterations & Improvements** - A tenant may alter or improve the property only after requesting and receiving permission from the Association.



**Right to Buy** - Langstane Housing Association tenants do not have the right to buy due to its charitable status.



**Debt Problems** - The Association can offer advice to assist tenants in the management of debt problems.

**Part A – About you and anyone applying for housing with you. Please fill in the details in this section. We have included notes on the right hand side of the page to help you.**

### 1 Your details

Please give details about you and anyone who is applying for housing with you. You must give as many details as you can.

	You	Joint applicant
Title (Mr/Miss/Mrs/Ms or Dr):		
First names:		
Family name:		
Address and postcode:		
Daytime phone number:		
Evening phone number:		
Mobile phone number:		
E-mail address:		
Date of birth:		
National Insurance number:		
Contact Address if different from above		
Any other names you have been known by , now or in the past:		

The joint applicant is any person you want to share a tenancy with. This can be a family member, partner or friend. They will be named on any tenancy you have and will have equal rights to any tenancy that you are awarded.

If you do not want us to write to you at your current address, please give us another address where we can contact you. This will be treated confidentially and we will not disclose this address.

If you have changed your name, or have been known by a different name, please tell us what this is.

Where did you hear about Langstane Housing Association?

Friends/Relatives  Advertisements

Social Work Department  Web Site

Local Authority  Other Housing Association

Other. Please state:

## 2 Your household details

Please give details of everyone in your current household. Do not include your details or the details of the person applying with you but you should enter the details of anyone else who lives in the house or who will be living with you. Without this information we may not be able to accurately assess your application.

Name	Date of birth	Relationship to you	Is this person living with you at the moment? (Please write 'Yes' or 'No')	Sex (Please write 'Male' or 'Female')	Will this person be moving with you? (Please write 'Yes' or 'No')

### 3 Are you, or anyone moving with you, pregnant?

Yes  No

If 'Yes', please tell us who and the date the baby is due.

Name	Date the baby is due

### 4 Are you responsible for looking after any children who do not live with you?

Yes  No

If 'Yes', please give details of the children.

Name	Date of birth	Relationship to you	How often do they visit you?	How long does the child stay with you for?

We will ask you to provide proof that the person is pregnant. This can be a letter or notification from the doctor or midwife.

This includes temporary foster care and access arrangements for children who do not live with you on a permanent basis. The need for additional bedrooms will be dependant upon the level of access that you have for the children. Confirmation of this arrangement may be required.

**5** Is there anyone living away from you who would normally live with you (for example, if they are in the armed forces, a student, in prison, in hospital and so on)?

Yes  No

If 'Yes', please give details.

Name	Date of birth	Relationship to you	Reason for living away from home

**6** Do you, or anyone moving with you, have a key worker or social worker?

Yes  No

Name of worker	Job title	Their address and phone number

**7** Please give the full addresses you and the joint applicant (if any) have lived at over the past three years (including your current address). If you have owned any of the homes you have listed, please put 'owner' in the 'landlord's name and address' box.

You

Address	From	To	Reason for leaving	Landlord's name and address

Joint applicant

Address	From	To	Reason for leaving	Landlord's name and address

If there is someone who would normally live with you but is currently living away, we can take them into account when considering you for a property. This will affect the number of bedrooms we can consider you for. However the person named here must not have permanent accommodation elsewhere.

This is anyone who works with you to support you in your current housing, education or work. By giving your support / key workers details and signing the declaration at the back of this form you are giving us permission to contact this person concerning this application.

If you are a tenant, we will ask your current landlord about your tenancy. This will include how you have conducted your tenancy and ask if you owe any money. This information may affect any tenancy that we may offer to you.

**8** Have you or anyone moving with you ever been evicted? (This includes by a private landlord, a council or a housing association).

Yes  No

If 'Yes', please give details

Address	Landlord's name and address	Date you moved in	Date you were evicted	Reason why you were evicted

If you have been evicted, this will not necessarily prevent us from offering you a home. We still need to know this information and will investigate the circumstances surrounding the reasons for your eviction.

**9** Do you currently owe any rent?

Yes  No

If 'Yes', do you have a repayment agreement in place to pay off the money you owe?

Yes  No

If 'Yes', please give details of the arrangements.

If you owe any rent on your current or a previous tenancy and you are keeping to an agreed repayment agreement, you can still be considered for a tenancy. For further information on this matter please contact the Housing Services Team

**10** Have you, or anyone moving with you, ever had action taken against you for antisocial behaviour?

Yes  No

If 'Yes', please say who and tell us what action was taken.

Name	Action taken, including the date it was taken

You must tell us if you have had any action taken against you for antisocial behaviour. This includes action by your landlord or the police. Again this may not affect you being offered housing with us but may affect the tenancy that you are awarded.

11 Do you, or anyone moving with you, have to register with the police under the Sex Offenders Act 2003?

Yes

No

## Part B – Your current home

This section looks at what your current housing is like.

1 Please tick the box that best describes your current home.

Council tenancy	<input type="checkbox"/>	Tied tenancy (linked to your job)	<input type="checkbox"/>
Housing Association tenancy	<input type="checkbox"/>	Lodging with someone	<input type="checkbox"/>
Tenancy with us	<input type="checkbox"/>	Own your own home	<input type="checkbox"/>
Tenancy with a private landlord	<input type="checkbox"/>	Caravan	<input type="checkbox"/>
Hostel or temporary accommodation	<input type="checkbox"/>	No permanent home	<input type="checkbox"/>
Hospital	<input type="checkbox"/>	In prison	<input type="checkbox"/>
Living with friends or family	<input type="checkbox"/>	Armed Forces accommodation	<input type="checkbox"/>
Subletting from someone else	<input type="checkbox"/>	Student Accommodation	<input type="checkbox"/>
Other (please tell us what)			

2 Have you been asked to leave your current home?

Yes

No

If 'Yes', by what date?  
You should also contact  
your local council about  
this

3 How many single bedrooms, double bedrooms and bedsits are there in your current home? Please state the number in the boxes.

Single bedrooms

Double bedrooms

Bedsits

4 Do you share a bedroom with anyone, apart from your partner?

Yes

No

If 'Yes', please say who you share with.

This issue will not prevent us from offering you a home. We may contact the police concerning any information that you provide to us.

Please tick the box that best describes your current housing situation.

If you have been asked to leave your current home, we will need to see a copy of your 'notice to quit' (the notice asking you to leave). Points cannot be awarded until we have seen this notice.

Please write a **number** in the relevant boxes.

A bedsit is a property that has a bedroom/living-room in one.

This can include someone you would not wish to share a bedroom with if you get a tenancy for example brother or sister. If you are sleeping in a communal room such as a Living room, please give details here.

**5** Please tick the appropriate boxes to show what access you have to the following facilities.

	Private	Shared	None
Piped hot water			
Piped cold water			
A shower or bath			
Inside toilet			
Cooking facilities			

**6** Have you or your landlord received a disrepair notice relating to your home?  
 (A disrepair notice is a notice served by the Environmental Health Department to the person who owns the property telling them they must make repairs.)

Yes  No

If 'Yes', what is this for?

**7** Do you need to move because of an medical condition that you or anyone else on your application has?

Yes  No

If 'Yes', please give details in the table below.

If 'No', please go to Part C.

Name of the person affected	What is their medical problem?	How does your home affect their health?

**8** Please give your doctor or consultant's name and address.

**8**

Please indicate whether you have access to the following facilities. Private facilities are for your use and that of the people moving with you only. Shared facilities are facilities that you share with people other than those moving with you.

We will need to see a copy of this notice and any information you have had concerning the condition of your home. Your Landlord or your local Environmental Health Department will be able to assist with this. Without this confirmation, no priority can be awarded for this.

We give you extra points if your home has a negative effect on your health and moving to another home would help you. This also applies to people who are moving with you. If you need to provide additional information on this please continue on a separate sheet.

Without your medical details and an explanation of how this affects you in your current home, additional priority cannot be awarded.

Before selecting yes for this question, please ensure that you have answered the medical question fully.

We award extra points to you if have to travel to get to a service or to give or receive support. To get these points, you must be applying to move closer to the source of your need to travel. I.e. closer to work or to the person you care for.

Harassment or violence includes domestic abuse and threats or violence from neighbours or other people.

We may ask the police for information about the harassment or violence you are experiencing.

9 Do you need to live on the ground floor because of your health?

Yes  No

**Part C - About the home you want**

**This section is about your reasons for applying for housing.**

1 Do you need to move so you can:

	Yes	No	How far do you travel for this? (miles)
• give or receive support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• get to college or university?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• get to work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• get to hospital or a medical centre?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered 'Yes' to any of the above, please give details including where the place is that you need to move closer to.

2 Do you have access to a car or other private transport?

Yes  No

If no, how far do you need to travel to your nearest public transport?

3 Do you need to move because you are being harassed or threatened with violence in your current home?

Yes  No

If 'Yes' have you reported this to the police?

Yes  No

If 'Yes', please give details of the incidents, including the names of the police officers dealing with your case.

**4** Are you applying for housing because a relationship has ended?

Yes  No

**5** How many bedrooms do you need? (Please write a number in the boxes below.)

Double bedrooms  Single bedrooms

If you need an extra bedroom for health reasons, please say why.

**6** Would you consider a furnished or partly furnished property?

Yes  No

**7** Would you consider a bedsit?

Yes  No

**8** Would you consider sharing a home with other people?

Yes  No

**9** If we offer you a flat, which floor level would you prefer?

Ground floor  First floor

Second floor and above  I don't mind

By relationship we mean any relationship where you have lived with another person. This could include family members.

We will assess your application based on the number of bedrooms your household needs.

We offer one bedroom for each person who would not normally share a room or could not be expected to do so.

A furnished property with us has carpets, blinds, a sofa and chairs, a bed, a fridge, a cooker and a washing machine.

A bedsit is a flat for one person. The living room and bedroom are one room but it has a private bathroom and kitchen.

If you share a home, you will have a private bedroom with a shared kitchen, bathroom and living room.

Most of the properties we manage are flats. Although none of these are High-rise flats please tell us what floor levels you would consider living on.

10 Where do you want to live?

Aberdeen

Bucksburn		Seaton	
Central		Torry	
Holburn		Woodside	
Old Aberdeen		Tillydrone	
Bridge of Don			

Aberdeenshire

Aberchirder		Portsoy	
Alford		Stonehaven	
Banff		Turriff	
Ellon		Westhill	
Fraserburgh		Aboyne	
Huntly		Inverbervie	
Inverurie		Laurencekirk	
Macduff		Kintore	
Peterhead		Kemnay	

Moray

Buckie		Keith	
Elgin		Lossiemouth	
Findhorn		Fochabers	
Forres		Tomintoul	
Roths			

Would you consider a Mutual Exchange?

Yes

No

You can choose as many areas as you want. The more areas you choose, the more properties we will be able to look at for you.

However, only choose areas you will accept a home in.

If we offer you a home and you choose not to accept it, this will not affect your position on our waiting list.

If you want a home in Aberdeen and you want other housing providers to consider you, please fill in a Homechoice application form in addition to this form. Details of where you can get this are on the back of this application form.

We also allocate some of our properties to applicants on the councils housing lists. Therefore, you should also fill in an application form for the council where you are choosing to live.

We do not manage properties in any other areas.

Mutual Exchanges allow existing tenants of Housing Associations and Councils to 'swap' their homes. For further information on this please contact the us.



## Declaration

I understand you will assess my application based on the information I have given in this form only. If my circumstances change at all, I will let you know as this may affect my priority for housing.

I declare that, as far as I know, the information I have given in this form is correct. I understand that if I provide false information, my application will be void. If I receive a property on the basis of false information you may take action to end my tenancy.

In line with the Data Protection Act 1998, I confirm that you may check the information I have given in this application form or ask me to provide more details that you may consider relevant. I also understand that you may share my personal information with other housing associations, councils or government agencies to process my application.

Your signature:

Date:

Signature of the person applying with you:

Date:

Please remember to send us any letters from your doctor, notices asking you to leave your home, or other documents to support your application. We will keep these strictly confidential and return them to you without delay.

Please make sure you have signed this declaration. We will not process any application that has not been signed.

Please send this form to one of the addresses below.

Langstane Housing Association  
680 King Street  
Aberdeen  
AB24 1SL

Phone: 01224 423000

Langstane Housing Association  
21 Culbard Street  
Elgin  
Morayshire  
IV30 1JT

Phone: 01224 423000



## Monitoring Information

You do not need to complete this section but we would welcome your help to help us get the best information to monitor our services.

We will not use the information you give on this sheet to assess your application. On receipt of this information, this page is detached and recorded separately and anonymously.

We do not base any offer of accommodation on this information.

We keep to the Race Relations Act 1976. We aim to put in place the Commission for Racial Equality code of practice for rented housing and follow 'raising standards in housing' to make sure we treat everyone who applies for housing (or lives in our home) equally.

### Ethnicity

Please tick the appropriate boxes to show your ethnic origin and the ethnic origin of the person applying with you.

	You	Person applying with you		You	Person applying with you
White (Scottish)			Indian		
White (other British)			Pakistani		
White (Irish)			Bangladeshi		
Gypsy or traveller			Chinese		
White (other)			Other Asian		
British or black Caribbean			Mixed		
British or black African			Other		
Black (other)			Prefer not to say		

### Disability

Do you consider yourself to be disabled?

You: Yes  No

Person applying with you: Yes  No

Are you a wheelchair user?

You: Yes  No

Person applying with you: Yes  No

**Gender**

Are you:

male? female? 

Is the person applying with you:

male? female? **Financial**

We use the following information to help us monitor whether people can afford to pay the rents we charge. Your income will not affect our decision on your application.

Are you currently employed? (By 'employed' we mean paid or unpaid work.)

Yes No Take Home Pay: £ Weekly  Monthly  Other (please say what) **Other Income**

Benefits (state type and amount)

Weekly  Monthly  Fortnightly  Other Maintenance: Student Grant : Private Pension: Other Income: