

**EXPRESSION OF INTEREST FOR LEASEHOLD SCHEMES FOR THE ELDERLY**

Cotman House  
53-57 St Martin's Lane  
Norwich  
NR3 3SA  
Tel: 01603 612927  
Fax: 01603 766963

The Association aims to be fair in its provision of housing and employment opportunities. In particular it shall not unlawfully discriminate, for example on the basis of race, nationality, colour, gender, sexual orientation or disability.

Please fill in this form carefully in ink and return it to the above address. It is important to answer as many questions as possible so that we can understand your housing need. If you have any difficulties in completing this form, please contact our Office for assistance.

|  |
|--|
| FOR OFFICE USE ONLY<br><b>Reg. No:</b> |
| <b>Type:</b>                           |
| <b>Location(s):</b>                    |

**Please tick ✓ correct boxes**

**About yourself and people seeking accommodation**

|   |  |                      |                      |                           |  |
|---|--|----------------------|----------------------|---------------------------|--|
| 1   | Name: Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> |                      |                      |                           |  |
|   | Address (including postcode)   |                      |                      | Contact telephone numbers |  |
|   |  |                      |                      | Home:                     |  |
|   |  |                      |                      | Work:                     |  |
|   |  |                      | Other:               |                           |  |
| How long have you been living at the above address? <input type="text"/>  |  |                      |                      |                           |  |
| Please list below details of <b>all other addresses</b> that you have been at during the <b>last 2 years</b> , including the dates you were at them and the <b>reason(s) for moving</b> |  |                      |                      |                           |  |
|   |  |                      |                      |                           |  |
|   |  |                      |                      |                           |  |
| 2   | Married/single/Couple/widowed/divorced/separated   |                      |                      |                           | <input type="text"/>                                     |
|   | Have you or anybody who will be living with you ever been a housing association or council tenant?                       |                      |                      |                           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
|   | (If yes please give landlord(s) name(s), address(es) you lived at, <b>reason(s)</b> for leaving and dates)               |                      |                      |                           |  |
|   |  |                      |                      |                           |  |
| Please give details of all people seeking accommodation   |  |                      |                      |                           |  |
| Full Name   | M or F   | Date of Birth        | Age                  | Relationship to you       |  |
| <input type="text"/>  | <input type="text"/>   | <input type="text"/> | <input type="text"/> | <b>SELF</b>               |  |
| <input type="text"/>  | <input type="text"/>   | <input type="text"/> | <input type="text"/> | <input type="text"/>      |  |
| <input type="text"/>  | <input type="text"/>   | <input type="text"/> | <input type="text"/> | <input type="text"/>      |  |
| Please indicate if any of the above are not living with you and explain why   |  |                      |                      |                           |  |
| <input type="text"/>  |  |                      |                      |                           |  |

## About your present housing

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Are you a: Private Tenant  Council Tenant  Housing Association Tenant   
Lodger  Owner/occupier  Homeless  Staying with family/friends

Do you live in a House  Bungalow  Bedsit  Flat/maisonette  Hostel  Other

On which floor?  Is there a lift? Yes  No

Please specify Other

How many bedrooms does the property have? 1  2  3  4  5

How many bedrooms are for your use? 1  2  3  4  5

Do you have your own bathroom? Yes  No  Shared

Who do you share it with?

Do you have your own inside toilet? Yes  No  Shared

Who do you share it with?

Do you have your own kitchen? Yes  No  Shared

Who do you share it with?

How many living rooms?  Are they shared? Yes  No

Who do you share them with?

Do you have hot and cold water? Yes  No

Heating: Do you have: Central Heating  Electric Fires  Gas Fires   
Other form of heating  Please specify

Please give details of all the repairs that are needed to your present home:

|  |
|--|
|  |
|  |
|  |

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Who owns the home you live in now? If not you, please give owner's name and address:

If you pay rent or board  
how much do you pay?

If you are buying your home how  
much is your monthly mortgage

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Will you have to sell your home before you can purchase a lease in the scheme? Yes  No

Do you envisage any difficulty in selling your home? Yes  No

If yes, please explain why:

At what price do you expect to see your home: £

What is the basis of your estimated selling price? (eg professional advice, comparison with recent sales of nearby properties?)

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Are you satisfied that you will be able to have enough funds to buy a lease? (If not, please explain why)

## About your income

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Please identify all sources of income in your household by entering the amounts in the boxes below

|                                      | Weekly Amount | Yourself | Partner |
|--------------------------------------|---------------|----------|---------|
| State Retirement Pension             | £             | £        | £       |
| Occupational Pension                 | £             | £        | £       |
| Income from current employment       | £             | £        | £       |
| Investment Income                    | £             | £        | £       |
| Other sources (please specify below) | £             | £        | £       |
|                                      |               |          |         |
|                                      |               |          |         |

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Do you or your partner have savings or capital? Yes  No

If yes, please give amounts



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Do you receive any state benefits or pension? Yes  No

If yes, please give details

|  |   |
|--|---|
|  | £ |
|  | £ |

|  |   |
|--|---|
|  | £ |
|  | £ |

Have you or your partner any other source of income?

Yes  No

If yes, please give details

|  |   |
|--|---|
|  | £ |
|--|---|

|  |   |
|--|---|
|  | £ |
|--|---|

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Your NI No:

Partner's NI No:

## About your health

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Do you or any of those who will move with you suffer from any illness or disability? Yes  No

If yes, please give details

Person's name:

Illness or disability:

How does this illness or disability affect your need for housing?

Are stairs a problem to you or anyone who will be living with you?

Yes  No

If yes, would you consider housing upstairs if there was a lift?

Yes  No

## About the housing you need

**YOU DO NOT NEED TO FILL IN THIS PART IF YOU ARE BEING CONSIDERED FOR A SPECIFIC PROPERTY**

Please indicate below which of our schemes and types of property you would consider

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### LEASEHOLD

Rowan Court, New Costessey,

St Margaret's Gardens, Hoveton

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Why do you want to move? Please give details of why your present accommodation is unsuitable for your housing needs and any further information you wish to give in support of your application.

Empty text box for providing reasons for moving.

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**Equal Opportunities**

If you prefer not to answer this question, it will not affect your housing application. We want to make sure that everyone who asks us for housing is treated fairly and equally, whatever their race, colour, or ethnic origin. To help us do this, and for that reason only, please answer the following by ticking one box in each column.

I would describe my ethnic origin as:

- White  British  Irish  Other
Mixed  White & Black Caribbean  White & Black African  White & Asian  Other

**Asian or Asian British**

- Indian  Pakistani  Bangladeshi  Other

**Black or Black British**

- Caribbean  African  Other

**Chinese or other ethnic group**

- Chinese  Other

**Refused**

I would describe my partners ethnic origin as:

- White  British  Irish  Other
Mixed  White & Black Caribbean  White & Black African  White & Asian  Other

**Asian or Asian British**

- Indian  Pakistani  Bangladeshi  Other

**Black or Black British**

- Caribbean  African  Other

**Chinese or other ethnic group**

- Chinese  Other

**Refused**

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Cotman Housing Association is not normally able to grant benefits to its employees and Committee Members or their close relatives. Are you or anyone who wishes to be re-housed with you related to anyone who is, or has been in the last 12 months, a member of Cotman Housing Association or staff?

Yes  No  If yes, please give details

Empty text box for providing details if 'Yes'.

**Declaration and your signatures**

As far as I know the answers I have given on this form are true and have no objection to them being verified. I understand that I must tell the Association if there are any changes in my circumstances. I understand that if I am offered accommodation on the basis of false information, the Association may decide to cancel the tenancy and take back the home.

Signature of Applicant

Signature line for Applicant

Date

Date line for Applicant

Signature (Joint Applicant)

Signature line for Joint Applicant

Date

Date line for Joint Applicant