

Please read the housing application guide before you start

Application for housing

This document is available in other formats such as audio tape, CD, Braille and in large print. It can also be made available in other languages on request.

該文件還有其他形式，如語音磁帶、CD、盲文版本及大字體版本。如有需求，還提供其他語言版本。

ਇਹ ਦਸਤਾਵੇਜ਼ ਹੋਰ ਰੂਪਾਂ ਵਿਚ ਵੀ ਮਿਲ ਸਕਦਾ ਹੈ, ਜਿਵੇਂ ਸੁਣਨ ਵਾਲੀ ਟੇਪ 'ਤੇ, ਸੀ ਡੀ 'ਤੇ, ਬੋਲ ਅਤੇ ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ। ਮੰਗ ਆਉਣ 'ਤੇ ਇਹ ਹੋਰ ਬੋਲੀਆਂ ਵਿਚ ਵੀ ਦਿੱਤਾ ਜਾ ਸਕਦਾ ਹੈ।

یہ دستاویز دیگر شکلوں میں بھی دستیاب ہے، جیسے آڈیو ٹیپ، سی ڈی، بریل اور بڑے حروف کی چھپائی میں۔ درخواست کرنے پر یہ دستاویز دیگر زبانوں میں بھی مہیا کی جا سکتی ہے۔

Ten dokument jest do uzyskania w różnych formatach: na taśmie dźwiękowej, płycie CD, brajlem i dużym drukiem. Na żądanie, można go także otrzymać w innych wersjach językowych.



Please return this form to any North Ayrshire Housing Register landlord's office. All addresses are listed on page 16 of this application form.



Fill in this form in **black ink** and write clearly in **BLOCK CAPITALS**.

Answer every question.

If you cannot answer a question, please write 'N/A' (not applicable) or 'Do not know' in the space provided.

If you are **homeless** or **may become homeless** within two months, you will need to contact the Housing Advice Team (HAT) at Galt House, 31 Bank Street, Irvine, KA12 0LL. You can phone them on 01294 314600.

If you are applying for a home with someone else, this form calls that person the 'joint applicant' and you must fill in the 'Joint applicant' boxes. If you are applying on your own, leave the 'Joint applicant' boxes blank.



If you see this symbol, you may need to send proof of your answers.

If you cannot send proof with your application, carry on filling in the application and return the form for assessment with all the information you have.

Please check the housing application guide for more details

You must fill in as much detail as possible to make sure we assess your housing need correctly.

Data protection

We need to handle information about you so that we can provide our services. When we ask you for personal information, we will:

- tell you why we need it;
- only ask for the information we need, and not collect too much or irrelevant information;
- protect the information and make sure it is only seen by those who need it for housing and Housing Benefit purposes;
- ask for your permission if we want to share your information with other organisations; and
- make sure we don't keep the information any longer than we need it for.

In return, you must:

- give us accurate information; and
- tell us as soon as possible if any of your circumstances change.

This helps us to keep your information up to date.

You can also contact us for information about the following

- How to find out what information we hold about you (there may be a charge for this service) and how you can ask us to correct any mistakes
- Agreements we have with other organisations for sharing information
- When we can pass on your personal information without telling you (for example, to prevent and detect crime or to produce statistics)
- Our instructions to staff on how to collect, use and delete your personal information
- How we check that the information we hold is accurate and up to date
- How to make a complaint

For more information

When we ask you for information, we will comply with data protection legislation. For independent advice about data protection and issues to do with privacy and sharing information, you can contact the Information Commissioner at:

Information Commissioner's Office
45 Melville Street, Edinburgh EH3 7JF.
Phone: 0303 123 1115
E-mail: scotland@ico.org.uk
Website: www.ico.org.uk

You and the joint applicant (if any)

You

Joint applicant

Title (Mr, Mrs, Miss and so on):

Surname or family name:

Other names:

Date of birth:

National Insurance number:

Are you currently serving in the Armed Forces?

Yes No

Are you a Veteran of the Armed Forces?

Yes No

Daytime phone number:

Evening phone number:

Mobile number:

E-mail address:

Current address and postcode:

What is the date you moved into this address?

Your landlord's name & address and postcode:

Address and postcode we can write to (if different from above):

Title (Mr, Mrs, Miss and so on):

Surname or family name:

Other names:

Relationship to you:

Date of birth:

National Insurance number:

Are you currently serving in the Armed Forces?

Yes No

Are you a Veteran of the Armed Forces?

Yes No

Daytime phone number:

Evening phone number:

Mobile number:

E-mail address:

Current address and postcode:

What is the date you moved into this address?

Your landlord's name & address and postcode:

Address and postcode we can write to (if different from above):

Asylum and Immigration Act 1999

Under the Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999, North Ayrshire Council must find out whether a person qualifies for help provided from public funds, including housing.

You

Are you under immigration control?

No Yes

Are there any conditions or limits to your permission to stay in the UK?

No Yes

If yes, please give details

Joint applicant

Are you under immigration control?

No Yes

Are there any conditions or limits to your permission to stay in the UK?

No Yes

If yes, please give details

Antisocial Behaviour etc (Scotland) Act 2004

Has action for antisocial behaviour ever been taken against you or anyone who will live with you?

No Yes (Answer the questions below if yes)

Was court action taken?

No Yes Date of case: Name of court:

Was other action taken?

No Yes

Was an antisocial behaviour order (ASBO) made?

No Yes If 'Yes', who against?

Sex Offenders Act 1997

Are you, or anyone who will live with you, registered under the Sexual Offences Act as amended by the Sexual Offences Act 2003? No Yes

If you or any member of your household must register under the terms of the Sex Offenders Act 1997 or the Sexual Offences Act 2003, you should send your form direct to the North Ayrshire SOLO officer, Housing Services - Community Safety Services, Galt House, 31 Bank Street, Irvine KA12 0LL, marked private and confidential. If you want to discuss your application, you can contact the SOLO officer by phone on 01294 314650. Sending your application to the SOLO officer does not mean you will get any less favourable treatment than you would otherwise receive.

Your housing details

People who will be moving with you

In the table below, give details of everyone who will move into your new home with you.

If you have shared access to children who live with you less than 50% of the time you should **not** include them here. We will need to see proof. Please tell us about any particular arrangements in the extra information box on page 15.

Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Full name: <input type="text"/>	Current address and postcode: <input type="text"/> <input type="text"/> postcode <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	

Are you or any person who will be moving with you expecting a baby? No Yes

If 'Yes', who is expecting the baby?

When is the baby due?

Your housing details

People who you currently live with but will not move with you

In the table below, give details of everyone who you currently live with who will not be moving into your new home with you.

Full name: <input type="text"/>	Full name: <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	Relationship to you: <input type="text"/>
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Full name: <input type="text"/>	Full name: <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	Relationship to you: <input type="text"/>
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Full name: <input type="text"/>	Full name: <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	Relationship to you: <input type="text"/>
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Full name: <input type="text"/>	Full name: <input type="text"/>
Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship to you: <input type="text"/>	Relationship to you: <input type="text"/>
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Date they moved in: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Previous addresses - You

Please list your addresses over the last five years, starting with the most recent.
You **do not** need to list your current address.

Address and postcode:

_____postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____postcode_____

Name and address of landlord:

From:

---Reason for leaving:

To:

Previous addresses - Joint applicant

Please list the joint applicant's addresses over the last five years, starting with the most recent
(if different from yours)

Address and postcode:

_____Postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____Postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____Postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Address and postcode:

_____Postcode_____

Name and address of landlord:

From:

Reason for leaving:

To:

Your current home

Please tick **one box** which best describes your present circumstances.

Are you:

- | | | | |
|---|--------------------------|--|--------------------------|
| a council tenant? | <input type="checkbox"/> | renting from a private landlord? | <input type="checkbox"/> |
| a housing association tenant? | <input type="checkbox"/> | living with parents? | <input type="checkbox"/> |
| living with friends or relatives? | <input type="checkbox"/> | an owner-occupier? | <input type="checkbox"/> |
| a lodger? | <input type="checkbox"/> | living in a caravan? | <input type="checkbox"/> |
| in hospital? | <input type="checkbox"/> | living in a local-authority children's unit? | <input type="checkbox"/> |
| living in a hostel or bed and breakfast? | <input type="checkbox"/> | in prison or another institution? | <input type="checkbox"/> |
| serving in HM Forces? | <input type="checkbox"/> | (for example, a young offenders institution) | |
| Date you will leave the forces | | living in accommodation provided | <input type="checkbox"/> |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | by your job? | <input type="checkbox"/> |

Other (please give details)

What type of property are you living in?

Please tick **one box**.

- | | | | | | |
|-----------------------------|--------------------------|-----------------------|--------------------------|--------------------------------|--------------------------|
| Flat (ground floor) | <input type="checkbox"/> | Basement flat | <input type="checkbox"/> | Multi-storey flat | <input type="checkbox"/> |
| Flat (upper floor) | <input type="checkbox"/> | Attic flat | <input type="checkbox"/> | Four in a block (ground floor) | <input type="checkbox"/> |
| Bungalow | <input type="checkbox"/> | House (mid-terrace) | <input type="checkbox"/> | Four in a block (upper floor) | <input type="checkbox"/> |
| Sheltered housing | <input type="checkbox"/> | House (end-terrace) | <input type="checkbox"/> | Maisonette (ground floor) | <input type="checkbox"/> |
| Amenity housing | <input type="checkbox"/> | House (three-storey) | <input type="checkbox"/> | Maisonette (upper floor) | <input type="checkbox"/> |
| | | House (semi-detached) | <input type="checkbox"/> | Bedsit | <input type="checkbox"/> |
| Other (please give details) | <input type="checkbox"/> | House (detached) | <input type="checkbox"/> | Retirement living | <input type="checkbox"/> |

How many bedrooms does your present home have?

If you have a separate dining room you should count this as a bedroom. A separate dining room must have a pass door from the hallway. There must also be a separate pass door to the kitchen (i.e. if you need to go through the kitchen to get to the dining room, then it is not classed as a separate room for the purposes of calculating bedrooms).

Have you been given a date to leave your current accommodation? No Yes

On what date do you need to move out?

Tick the appropriate boxes below to show if you share or do not have any of the following.

- | in your current home. | Do not have | Share |
|-----------------------|--------------------------|--------------------------|
| Living room | <input type="checkbox"/> | <input type="checkbox"/> |
| Hot water supply | <input type="checkbox"/> | <input type="checkbox"/> |
| Bath or shower | <input type="checkbox"/> | <input type="checkbox"/> |
| Bathroom | <input type="checkbox"/> | <input type="checkbox"/> |
| Cold water supply | <input type="checkbox"/> | <input type="checkbox"/> |
| Inside toilet | <input type="checkbox"/> | <input type="checkbox"/> |
| Kitchen | <input type="checkbox"/> | <input type="checkbox"/> |

Is there a 'closing order' over your present accommodation?

(See page 6 of the housing application guide issued with this form for an explanation of a closing order).



No Yes

Is there enough ventilation (windows or extractor fans) in your kitchen and bathroom?

No Yes

If there are any faults with your house that make it not fit to live in, tell us about them in the box below. This could include structural faults, dampness, unsafe electrics, dry rot and so on.

We may need to assess any problems

What type of heating do you have?

Please tick **one box**.

- | | | | | | |
|----------------------------|--------------------------|---------------------|--------------------------|-----------------------------|--------------------------|
| Coal-fired central heating | <input type="checkbox"/> | Electric fire only | <input type="checkbox"/> | Other (please give details) | <input type="checkbox"/> |
| Coal fire only | <input type="checkbox"/> | Gas central heating | <input type="checkbox"/> | <input type="text"/> | |
| Electric central heating | <input type="checkbox"/> | Gas fire only | <input type="checkbox"/> | | |

Accessible housing

Do you, or anyone who would move with you, have a health problem or disability that affects the type of home you need?

No Yes

Could moving to a different type or size of home help with some or all of the difficulties?

No Yes

If you have answered 'Yes' to both questions you must fill in an Application for Accessible Housing (which you can get from us) for each person who would benefit from accessible housing.

Social factors

Harassment

Do you need to move because you or someone living with you is experiencing harassment or domestic abuse?

No Yes

Give further details below. We will keep the information you give confidential.

You may need to provide extra documents to support this information.

Support

Do you need to move to give support to, or receive support from, someone?

No Yes

Give details below

Name of a person you care for or who cares for you:	
Relationship to you (if any):	
Address:	
Phone number:	

Do you want to move to be nearer a relative?

No Yes

Give details below

Name of relative:	
Relationship to you:	
Address:	
Phone number:	

Do you receive support from a social worker or health professional?

No Yes

Give details below

Their name:	
Occupation	
Organisation:	
Address:	
Phone number:	

Employment details

Do you need to move to take up work or be closer to your place of work?

Give the relevant employer's details below.

No Yes

Present employer's details

Name: _____

Address: _____

Phone: _____

Your occupation: _____

Future employer's details (if appropriate)

Name: _____

Address: _____

Phone: _____

Your occupation: _____

Date you start work:

Looked after and accommodated

Have you been 'looked after and accommodated'?

No Yes

(That is, you have lived in a children's care home, foster care, residential school or with a link carer) Give details below

Unit or carer's name:	
Address:	
Phone number:	

Housing options

Mutual exchange

If you are a council or housing association tenant, would you consider a mutual exchange (where you swap tenancies with another tenant)?

No Yes

By saying 'yes' to this question you are agreeing to your details being publicly displayed

Other options

As well as housing from us, would you consider any of the following if they were available in the areas you want to live in?

You can tick as many boxes as you like.

Buying a new low-cost house or flat

Shared-ownership (where you part-buy and part-rent a home from a housing association)

Shared equity (where you part-buy a home from a housing association)

Buying or improving an older property with help from a grant

Buying a house or flat on the open market

Building your own home

Renting from a private landlord

Can we pass your details to developers offering these options?

No Yes

The housing you want

Tick your choices from the boxes below.

Please see the housing application guide for more details.

You can tick as many boxes as you like.

Which housing providers will you consider?

- | | | |
|---|---|--------------------------|
| <input type="checkbox"/> North Ayrshire Council | <input type="checkbox"/> Cunninghame Housing Association | <input type="checkbox"/> |
| <input type="checkbox"/> ANCHO | <input type="checkbox"/> Irvine Housing Association | <input type="checkbox"/> |
| <input type="checkbox"/> Isle of Arran Homes | <input type="checkbox"/> Bield Housing Association | <input type="checkbox"/> |
| <input type="checkbox"/> Hanover Housing Association | <input type="checkbox"/> Horizon Housing Association | <input type="checkbox"/> |
| <input type="checkbox"/> Key Housing Association | <input type="checkbox"/> Margaret Blackwood Housing Association | <input type="checkbox"/> |
| <input type="checkbox"/> West of Scotland Housing Association | | |

What size of property would you consider?

Please tick sizes you would accept and that your household is eligible for. The allocation policy will decide which property size you are eligible for. However, if your household is eligible for two or three different sizes of property, we will take account of your choice.

- | | | |
|--|--|--------------------------|
| <input type="checkbox"/> Bedsit (no bedroom) | <input type="checkbox"/> One bedroom | <input type="checkbox"/> |
| <input type="checkbox"/> Two bedroom | <input type="checkbox"/> Three bedroom | <input type="checkbox"/> |
| <input type="checkbox"/> Four bedroom | <input type="checkbox"/> Five or more bedrooms | <input type="checkbox"/> |

What type of heating would you accept?

- Gas central heating Electric central heating

What type of property do you want?

- | | | |
|---|---|--|
| <input type="checkbox"/> House (mid-terrace) | <input type="checkbox"/> House (three-storey end-terrace) | <input type="checkbox"/> Flat (ground floor) |
| <input type="checkbox"/> House (end-terrace) | <input type="checkbox"/> Bungalow | <input type="checkbox"/> Flat (upper floor) |
| <input type="checkbox"/> House (semi-detached) | <input type="checkbox"/> Multi-storey flat | <input type="checkbox"/> Maisonette (ground floor) |
| <input type="checkbox"/> House (detached) | <input type="checkbox"/> Four in a block (ground floor) | <input type="checkbox"/> Maisonette (upper floor) |
| <input type="checkbox"/> House (three-storey mid-terrace) | <input type="checkbox"/> Four in a block (upper floor) | |

What is the highest floor you would consider living on (for example, second or third floor, up to the 13th floor)?

Specific housing

Do you want or need any of the following types of accommodation?

- Amenity housing
- Sheltered housing/retirement living
- Housing with access for wheelchairs
- For an explanation of sheltered and amenity housing, please see the housing application guide

Would your new home need any adaptations to meet your needs? No Yes

If yes, in order to assess your adaptation requirements, please fill in an Application for Accessible Housing. You can get this from any of the housing offices.

Location

Which areas in North Ayrshire would you prefer to live in?

Read the 'Housing application guide' for information on areas, neighbourhoods and housing providers and then, in the spaces below, tick the areas you would prefer to live in.

The more you tick, the better your chance of being offered housing.

- | | | | | | | | |
|--------------------------|--------------------------|------------------|--------------------------|-------------------|--------------------------|----------------------|--------------------------|
| Ardrrossan | <input type="checkbox"/> | Irvine | <input type="checkbox"/> | Kilbirnie | <input type="checkbox"/> | Largs | <input type="checkbox"/> |
| North of Stanley Road | <input type="checkbox"/> | Bourtreehill | <input type="checkbox"/> | Fudstone | <input type="checkbox"/> | Fairlie | <input type="checkbox"/> |
| South of Stanley Road | <input type="checkbox"/> | Broomlands | <input type="checkbox"/> | Garden City | <input type="checkbox"/> | Largs | <input type="checkbox"/> |
| Arran | <input type="checkbox"/> | Castlepark | <input type="checkbox"/> | Loadingbank | <input type="checkbox"/> | Skelmorlie | <input type="checkbox"/> |
| Beith | | Dreghorn | <input type="checkbox"/> | Longbar | <input type="checkbox"/> | West Kilbride | <input type="checkbox"/> |
| Barrmill | <input type="checkbox"/> | Drybridge | <input type="checkbox"/> | Milton | <input type="checkbox"/> | Saltcoats | |
| North of Eglinton Street | <input type="checkbox"/> | Fullarton | <input type="checkbox"/> | Town Centre | <input type="checkbox"/> | North of High Road | <input type="checkbox"/> |
| South of Eglinton Street | <input type="checkbox"/> | Girdle Toll | <input type="checkbox"/> | Kilwinning | | South of High Road | <input type="checkbox"/> |
| South of Wilson Street | <input type="checkbox"/> | Harbourside | <input type="checkbox"/> | Blacklands | <input type="checkbox"/> | Stevenston | |
| Cumbræ | | Irvine Central | <input type="checkbox"/> | Corsehill | <input type="checkbox"/> | North of Town Centre | <input type="checkbox"/> |
| Millport | <input type="checkbox"/> | Irvine East | <input type="checkbox"/> | Dirrans | <input type="checkbox"/> | South of Town Centre | <input type="checkbox"/> |
| Dalry | | Irvine North | <input type="checkbox"/> | Pennyburn | <input type="checkbox"/> | Stevenston Centre | <input type="checkbox"/> |
| Blair Scheme | <input type="checkbox"/> | Lawthorn | <input type="checkbox"/> | Pennyburn Squares | <input type="checkbox"/> | | |
| Lynn Scheme | <input type="checkbox"/> | Montgomerie Park | <input type="checkbox"/> | Town Centre | <input type="checkbox"/> | | |
| Town Centre | <input type="checkbox"/> | Riverside | <input type="checkbox"/> | Whitehirst Park | <input type="checkbox"/> | | |
| West Kilbride Scheme | <input type="checkbox"/> | Springside | <input type="checkbox"/> | Woodwynd | <input type="checkbox"/> | | |
| | | Tarryholme | <input type="checkbox"/> | | | | |
| | | Vineburgh | <input type="checkbox"/> | | | | |
| | | Woodlands | <input type="checkbox"/> | | | | |

For any area you have chosen, list any streets (including the town the street is in) that you do not want to be considered for.

Representative

Do you want us to deal with someone else on your behalf (a representative) with your application for housing? No Yes

Give your representative's details below

Representative's name:	
Relationship to you (if any):	
Address:	
Phone number:	
E-mail address:	

If you appoint a representative, all the housing providers taking part in the NAHR can give personal information about you to your representative in connection with your application for housing. You cannot hold any housing provider responsible for information they share with your representative.

Your signature: _____ Date: _____

Joint applicant's signature: _____ Date: _____

Personal connection

Have you or anyone who would live with you ever been:

- a North Ayrshire councillor;
- a management-board member or committee member of a housing association taking part in the NAHR; or
- an employee of one of the NAHR housing associations or of North Ayrshire Council Housing Services?

This includes if you are currently one of the above. No Yes

Are you or anyone who would live with you related to someone who is or was:

- a North Ayrshire councillor;
- a management-board member or committee member of a housing association taking part in the NAHR; or
- an employee of one of the NAHR housing associations or of North Ayrshire Council Housing Services?

No Yes

Give details below if you answered Yes.

--

This will not affect your application but, by law, we have to ask.

Extra information

Use the box below to give us any other information you think is relevant to your application.

Declaration

Please read this declaration carefully.

I confirm that the details I have given on this application form are true and accurate.

I understand and agree that my information may be shared with other bodies responsible for auditing or administering public funds, in order to prevent and detect fraud.

I understand that if my circumstances change, I must tell the housing provider I returned this application to.

I understand that if I give any false or misleading information, or do not provide relevant information, my application can be cancelled.

If I get a tenancy based on false or misleading information, I understand that the landlord may take court action to evict me.

I understand that the housing providers can ask for references from any landlord or mortgage lender I have had. I authorise these landlords or mortgage lenders to provide any information the housing providers need in connection with my housing application.

I understand that this application will be cancelled when I accept a property offered through the register. If I want to move again, I know that I would have to make a new application.

I understand that the details I have given in this application are going to be put on the register and you will share this information with any or all landlords using the register.

I understand that you will write to me every year, on the anniversary of my application, asking if I still want housing. I agree that if I do not respond to that letter, you will cancel my application.

Signatures (if you are applying with someone else, you must both sign or we will not process the form)

Your signature: _____ Date: _____

Joint applicant's signature: _____ Date: _____

Equal opportunities over the page

North Ayrshire Housing Register offices

Irvine

Bridgeway House
Irvine, KA12 8BD
Phone **01294 310 150**

Kilwinning

35 Main Street
Kilwinning, KA13 6AN
Phone **01294 552 261**

Three Towns Housing Office

The Town Hall
Countess Street
Saltcoats, KA21 5HW
Phone **01294 310 005**

Kilbirnie

Garnock Valley Area Centre
Craigton Road
Kilbirnie, KA25 7LJ
Phone **01505 685 177**

Dalry

2 Sharon Street
Dalry, KA24 5DR
Phone **01294 836 710**

Largs

Brooksby Medical and Resource Centre
31 Brisbane Road
Largs, KA30 8LH
Phone **01475 687 590**



North Ayrshire Council
Comhairle Siorrachd Àir a Tuath

www.north-ayrshire.gov.uk



Sovereign House,
Academy Road
Irvine, KA12 8RL
Phone **01294 313 121**
www.ancho.co.uk



44-46 Bank Street
Irvine, KA12 0LP
Phone **0845 112 6600**
Phone **0345 112 6600**
www.irvineha.co.uk



Quayside Offices
Marina Quay, Dock Road
Ardrossan, KA22 8DA
Phone **01294 468 360**
www.cunninghame-housing.org

Equal opportunities monitoring

Plain English Campaign's Crystal Mark does not apply to the form below

We will keep all the information we collect confidential. The following information is for monitoring purposes only. We will use this to produce statistics of the people applying for housing. We will not use your name and address.

You do not need to answer these questions, but we would appreciate your help. Your responses will not affect your application as these are for statistical purposes only.

Please tick the appropriate boxes below. Answer also for any joint applicant.

I do not want to answer any of these questions.

You

1. Are you:

male? female?

2. Are you:

single? married?

divorced? widowed?

legally separated? in a civil partnership?

3. Do you consider yourself to:

be blind or visually impaired?

be profoundly deaf or hearing impaired?

have a physical disability?

have any other disability?

Give details below:

What is your ethnic group?

A White

Scottish

Other British

Irish

Any other white background (give details below)

Please turn over for other ethnic groups

Joint applicant

1. Are you:

male? female?

2. Are you:

single? married?

divorced? widowed?

legally separated? in a civil partnership?

3. Do you consider yourself to:

be blind or visually impaired?

be profoundly deaf or hearing impaired?

have a physical disability?

have any other disability?

Give details below:

What is your ethnic group?

A White

Scottish

Other British

Irish

Any other white background (give details below)

Please turn over for other ethnic groups

Equal opportunities monitoring

You

B Mixed or multiple ethnic groups

Give details below

C Asian, Asian Scottish or Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

Give details below

D Black, Black Scottish or Black British

Caribbean

African

Any other Black background

Give details below

E Gypsy / Traveller

F Other ethnic background

Give details below

Joint applicant

B Mixed or multiple ethnic groups

Give details below

C Asian, Asian Scottish or Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

Give details below

D Black, Black Scottish or Black British

Caribbean

African

Any other Black background

Give details below

E Gypsy / Traveller

F Other ethnic background

Give details below