

# Application for Housing



## Blairtummock Housing Association Ltd

45 Boyndie Street, Easterhouse,  
Glasgow G34 9JL

Email: [enquiries@blairtummock.org.uk](mailto:enquiries@blairtummock.org.uk)  
Web: [www.blairtummock.org.uk](http://www.blairtummock.org.uk)

Tel: 0141 773 0202  
Scottish Charity Number: SCO36997

**thebigword**  
connecting words connecting worlds

## Personal Details

### Applicant

Full Name: \_\_\_\_\_  
Gender: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Flat Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
  
Postcode: \_\_\_\_\_  
Tel Home: \_\_\_\_\_  
Tel Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

### Joint Applicant

Full Name: \_\_\_\_\_  
Gender: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Flat Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
  
Postcode: \_\_\_\_\_  
Tel Home: \_\_\_\_\_  
Tel Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

## Joint Applicant

What is your relationship to the Joint Applicant? e.g. spouse, partner, friend etc: \_\_\_\_\_

## Employment Details

### Applicant

Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
  
\_\_\_\_\_

### Joint Applicant

Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
  
\_\_\_\_\_

## Voluntary Work, Training/Apprenticeship or Further Education

Please tick if you are involved in any:

Local community or voluntary work  Training or apprenticeship scheme  Further education

Please provide details: \_\_\_\_\_

## People who live with you

(include anyone not currently living with you to be rehoused with you)

| Full Name | Gender | Date of Birth<br>dd/mm/yy | Relationship<br>to Applicant | Current Address<br><i>if different from Applicant</i> | Please tick if this<br>person will be<br>moving with you | Please tick if you<br>only have access<br>to this child |
|-----------|--------|---------------------------|------------------------------|---|--|---|
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |
|           |        |                           |                              |   |  |   |

## Your current home and you

How many bedrooms in your current home?

Please tick if anyone anyone included in this form is pregnant.

Name of person who is pregnant & their due date: \_\_\_\_\_

Please tick if you or the joint applicant provide kinship care.

Please tick if you or the joint applicant have left, or will soon leave, the Armed Forces.

## Main Applicant: Current & Previous Addresses

Please provide details of your addresses for the last 5 years, starting with your current address

| Address  | Landlord's Name<br>and Address | Tenant/Lodger/<br>Owner | Date Moved In<br>and Out | Reason for Leaving |
|----------|--------------------------------|-------------------------|--------------------------|--------------------|
| Current  |                                |                         |                          |                    |
| Previous |                                |                         |                          |                    |

## Joint Applicant: Current & Previous Addresses

Please provide details of your addresses for the last 5 years, starting with your current address

| Address  | Landlord's Name<br>and Address | Tenant/Lodger/<br>Owner | Date Moved In<br>and Out | Reason for Leaving |
|----------|--------------------------------|-------------------------|--------------------------|--------------------|
| Current  |                                |                         |                          |                    |
| Previous |                                |                         |                          |                    |

## Social Support

Do you want to move to the area to give support to, or receive support from, someone who lives within the Blairstummock area?

Yes  No

If Yes, please provide support information:

Name & Address: \_\_\_\_\_

Details of support given or received: \_\_\_\_\_

## Location Needs

Do you want to move to be closer to your place of employment, training, education or voluntary work?

If Yes, please provide details: \_\_\_\_\_

Yes  No

## Your new home

Please think carefully what type of property you would accept. Your prospects for rehousing may take longer depending on your choices. Please tick all you would accept:

House  Main door flat  Ground floor  1st floor  2nd floor  3rd floor

Please let us know any parts of the area or streets you would not accept. We will not make you offers of housing in those areas or streets:

  
  
  

## General

Are you or the joint applicant in arrears, or have other housing debt, with your current or former landlord/mortgage lender?

Yes  No

Has anyone who will be living in the house had any action taken against them for anti-social behaviour in the last 3 years?

Yes  No

Have you or the joint applicant had a court order granted against you for recovery of possession of your house in the last 3 years?

Yes  No

Has anyone who will be living in the house been convicted of a criminal offence in relation to their house, or in the locality of their house, in the last 3 years?

Yes  No

Have you or the joint applicant had a tenancy, or interest in a tenancy, terminated by the landlord due to abandonment in the last 3 years?

Yes  No

Have you or the joint applicant had a tenancy terminated by the landlord due to neglect or its condition in the last 3 years?

Yes  No

Do you or the joint applicant own outright, or have a mortgage on, your current home or any other property?

Yes  No

Does anyone who will be living in the house have any criminal convictions which are not yet spent under the Rehabilitation of Offenders Act 1974?

Yes  No

Does anyone who will be living in the house require to register with the police under the Sexual Offences Act 2003?

Yes  No

## Why are you applying for housing?

Please tick **if any of the following boxes** describe your reasons for applying:

Homeless

## Unsatisfactory Housing

Health

Support

## Financial

## Harassment

Location

Other

Please give details for ticking any of the above boxes. You can also provide any additional information to questions you have answered on this form or why you are for applying for housing:

## Declaration

I/We certify that the information given in this application is a true record of my/our present circumstances. I consent to Blairstummock Housing Association making any enquiries, as may be necessary, to verify the information provided in this application.

I/We understand any false or misleading information, or relevant information being withheld, may result in:

- a) The application being cancelled and removed from the Housing List
- b) An offer of a tenancy being immediately withdrawn
- c) Legal proceedings being taken for repossession of the tenancy if a tenancy has already been granted

I/we agree to notify the Association of any change in my / our circumstances described in this application.

I/We give our consent to processing of personal data, including sensitive personal data, in this application form and fully understand the Association will process the information contained in this application form, and any other relevant information it obtains in connection with the application, as per current data protection legislation and regulations.

## Personal Connection

I have a personal connection with: \_\_\_\_\_

Who is a Committee / Staff member of Blairstummock Housing Association. The nature of the connection is: \_\_\_\_\_

---

**Applicant Signature**

Date

---

**Joint Applicant Signature**

Date

## Equal Opportunities

Please answer the following questions which we use for information purposes only. Your answers help us monitor equal opportunities and make sure no applicant is discriminated against. This page will be removed and kept separate from your application. Please note your answers will in no way influence whether or not you are offered housing by us. Your application will not be affected if you choose not to answer any of the following questions.

**Please tick the box below which best describes the ethnic origin of your household:**

| <b>White</b>                                  | <b>Please tick ✓</b> |
|---|----------------------|
| Scottish                                      |                      |
| Other British                                 |                      |
| Irish   |                      |
| Gypsy/Traveller                               |                      |
| Polish  |                      |
| Any Other White Background                    |                      |
| <b>Mixed</b>                                  |                      |
| Any Mixed or Multiple Ethnic Background       |                      |
| <b>Asian, Asian Scottish or Asian British</b> |                      |
| Indian  |                      |
| Pakistani                                     |                      |
| Bangladeshi                                   |                      |
| Chinese                                       |                      |
| Any Other Asian Background                    |                      |
| <b>Black, Black Scottish or Black British</b> |                      |
| Caribbean                                     |                      |
| African                                       |                      |
| Any Other Black Background                    |                      |
| <b>Other Ethnic Background</b>                |                      |
| Arab  |                      |
| Any Other Background                          |                      |
| Refused                                       |                      |
| Unknown                                       |                      |

| <b>Disability</b>                              | <b>Yes</b> | <b>No</b> |
|--|------------|-----------|
| Do you consider yourself to have a disability? |            |           |