

Application Form

FOR OFFICE USE ONLY:

	Date received:	Received by (initials):
Choice Based Lettings Application Form received:		

Evidence requested:

Birth Certificate(s)		
Residence Orders		
Pregnancy notes		
Other (please note): _____ _____ _____		

Is Applicant(s) interested in:

YES / NO

Housing Association properties?

Shared Ownership?

Key Worker Scheme?

Rent Accounts – Tenant(s) only:

YES / NO

Is rent account in arrears?

Visit Report:

Signed (Housing Officer):

Date:

Category

Housing Need

Banding

Approved by

High housing need

Moderate housing need

Low or no particular housing need

Household from outside the Borough

Application Form



www.dartfordhomesseeker.co.uk

Please complete all sections

Are you (*please tick*):

- a Dartford Borough Council or Housing Association tenant? a new applicant(s)?

Do you require (*please tick*):

- family housing?
 single persons housing?
 Supported (Sheltered) Housing?
 Other (*please specify – single person and a carer needing 2 bedrooms, etc*)

1. Personal Details:

Title (Mr/Mrs/Ms/Miss/Other – *please state*):

Surname:

First name(s):

Date of birth:

Address:

Postcode:

Telephone number (home):

Telephone number (work):

Telephone number (mobile):

E-mail address:

National Insurance Number:

Date you moved into current home:

Do you live in (*please tick*):

- House Bungalow
 Maisonette Flat
 Bedsit Sheltered Accommodation
 Other (*please specify*):

2. Details of additional people to be housed with you as part of your housing application:

Title	Surname	First name	Gender M/F	Relationship to applicant	Date of birth	Address if different to applicant
				APPLICANT		

a) Is anyone listed above not living with you? YES / NO
 If YES, who is it and where are they living?

Name:

Address:

Why are they not able to live with you?

b) Does/Has anyone included in your application own/owned a residential property? YES / NO
 If YES, please give details:

Name:

Address:

Is the property still owned/sold, etc? Please give details:

3. Previous names:

Have you or anyone else on this application been known to this or any other local authority by any other name?

YES / NO

Applicant: If YES, what was your previous name(s):

Spouse/partner: If YES, what was their previous name(s):

4. Pregnancy:

Are you, or any of the people mentioned in question 2, pregnant?

YES / NO

If YES, who is pregnant? Name:

What is the expected delivery date?

5.

If you or your partner are divorced/separated, do you have care or control for children included in this application?

YES / NO / Not applicable

6.

a) Does any person included in your application have a disability (learning or physical), mobility or mental health problems that need specialised or adapted accommodation?

YES / NO

If YES, please give details, e.g. wheelchair dependent, partially sighted, unable to use a bath, etc.

b) Are there any medical factors, including mental health problems, that are affected by living in your present accommodation?

YES / NO

If YES, please give details:

7. Details of your current accommodation:

a) Which best describes your current housing situation?

- | | |
|---|---|
| <input type="checkbox"/> Council Tenant | <input type="checkbox"/> Owner |
| <input type="checkbox"/> Living with parents/relatives | <input type="checkbox"/> Housing Association Tenant |
| <input type="checkbox"/> Private Tenant | <input type="checkbox"/> Lodger |
| <input type="checkbox"/> Other (<i>please specify</i>): | |

b) If you live in a flat or maisonette, please indicate which floor:

- | | |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Ground floor | <input type="checkbox"/> First floor |
| <input type="checkbox"/> Second floor | <input type="checkbox"/> Other |

c) How many rooms are there in the property?

Bedrooms	Living/Dining rooms
Kitchens	Bathrooms
Internal toilets	External toilets

d) Is there a hot water system? YES / NO

e) What form of heating do you have?

f) If you live in a caravan, how many rooms does it have?

g) **Previous addresses:** Please give details of **all** your previous addresses, starting with your current one:

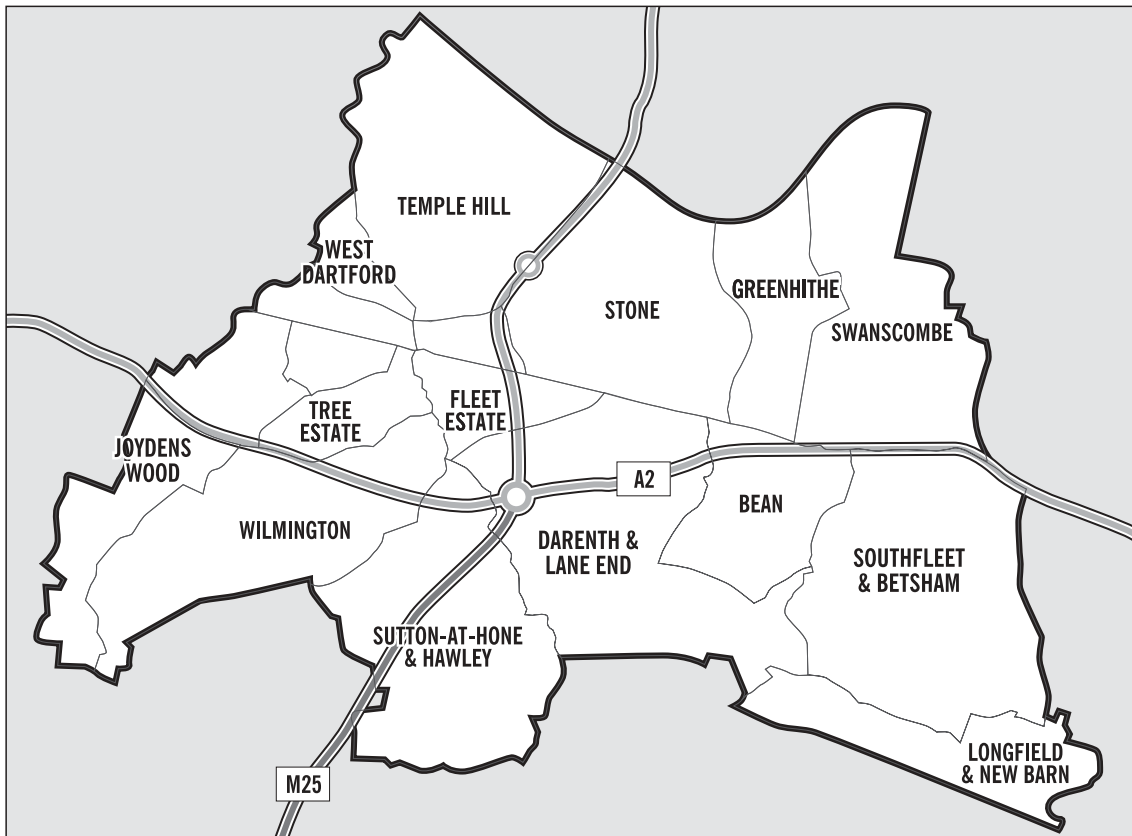
Address:	Date from:	Date to:	Type of tenure (tenant/ owner/lodger/living with relatives, etc):	Reason for leaving:
Applicant:				
Spouse/Partner:				

a) *continued*

New Applicants:		Existing Tenants:	
Neighbour problems		Need a cheaper rent	
Accommodation too small or too large		Unhappy with area	
Health reasons		Other (<i>please specify</i>): _____ _____ _____	
Leaving hospital/care home			
Leaving HM Forces			
Due to be released from prison			

If you have been served with an official Eviction Order/Notice to Quit please supply a copy.

b) Where would you like to live?



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Please state your preferred areas:

1st:	8th:
2nd:	9th:
3rd:	10th:
4th:	11th:
5th:	12th:
6th:	13th:
7th:	

- c) Are you interested in Housing Association properties? YES / NO
- Are you interested in Shared Ownership (part rent/part buy)? YES / NO
- Do you consider yourself/partner to be a Key Worker? YES / NO
- (A Key Worker is someone who is working to improve the education, health and safety of Dartford's community, and includes other public sector workers and some private sector employees who meet the Council's criteria.)*
- If YES, would you like more information on Key Worker Housing in Dartford? YES / NO

- d) Do you have any pets? YES / NO
- If YES, please give details, i.e. type, breed, number:
- _____
- _____
- _____

10. Additional personal data:

- a) Has anyone on your application entered the UK in the last ten years? YES / NO
- If YES, please give details:
- _____
- _____
- _____
- _____
- It may be necessary for us to contact the Home Office to verify their status, please give your Home Office Reference Number:
- _____

- b) **Sex Offenders Act:**
- Have you, or anyone included in your application, been convicted under the Sex Offences Act 1997 and placed on the Sex Offenders register? YES / NO
- If YES, please give details and dates:
- _____
- _____
- _____

- c) **Anti Social Behaviour Order:**
- Do you, or any other person included in your application, have a current Anti Social Behaviour Order against them? YES / NO
- If YES, please give details and dates:
- _____
- _____
- _____

You do not need to disclose a conviction if it is 'spent' under the Rehabilitation of Offenders Act 1974. Please refer to the guidance notes at the back of this application form if you are unsure if a conviction is spent.

DATA PROTECTION ACT 1998 EQUAL OPPORTUNITIES NOTIFICATION CLAUSE

Monitoring of ethnic origin, race, sex or disability by the Council is a necessary element of an established programme for the promotion of equality of opportunity and the elimination of discrimination or where it is otherwise needed because of some special feature of a housing function.

Wherever possible the Council will keep the information used for equal opportunities monitoring in an anonymous form so that it cannot be linked to any particular individual.

All or part of the statistical information provided may be disclosed or supplied to relevant committees of the Council and to external organisations or bodies such as the Audit Commission/Local Government Departments for statistical information purposes and/or best value performance indicators.

The data collected for monitoring purposes is aggregated, kept apart from general housing records and subject to strictly controlled access procedures.

EQUAL OPPORTUNITIES

The follow question relates to your ethnic origin. This information is needed only to ensure that all applications receive equal treatment regardless of race, colour, ethnic or national origin. Your application will not be prejudiced in any way if you do not answer this question.

I would describe my ethnic or national origins as follows *(please tick one box for yourself and one for your spouse/partner):*

Ethnic origin	Applicant:	Spouse/ Partner:	Ethnic origin	Applicant:	Spouse/ Partner:
White:			Black or Black British:		
British 01	<input type="checkbox"/>	<input type="checkbox"/>	Caribbean 05	<input type="checkbox"/>	<input type="checkbox"/>
Irish 02	<input type="checkbox"/>	<input type="checkbox"/>	African 04	<input type="checkbox"/>	<input type="checkbox"/>
Other 03	<input type="checkbox"/>	<input type="checkbox"/>	Other 06	<input type="checkbox"/>	<input type="checkbox"/>
Mixed:			Chinese or other ethnic group:		
White & Black Caribbean 12	<input type="checkbox"/>	<input type="checkbox"/>	Chinese 15	<input type="checkbox"/>	<input type="checkbox"/>
White & Black African 11	<input type="checkbox"/>	<input type="checkbox"/>	Other 16	<input type="checkbox"/>	<input type="checkbox"/>
White & Asian 13	<input type="checkbox"/>	<input type="checkbox"/>	Refuse to answer 17	<input type="checkbox"/>	<input type="checkbox"/>
Other 14	<input type="checkbox"/>	<input type="checkbox"/>			
Asian or Asian British:					
Indian 07	<input type="checkbox"/>	<input type="checkbox"/>			
Pakistani 08	<input type="checkbox"/>	<input type="checkbox"/>			
Bangladeshi 09	<input type="checkbox"/>	<input type="checkbox"/>			
Other 10	<input type="checkbox"/>	<input type="checkbox"/>			

What is your 1st language?

DATA PROTECTION ACT 1998 NOTIFICATION CLAUSE

The information you have provided on this form will be used to process your application for housing. It will be held securely and used in connection with your application.

All or part of the information provided may be disclosed or supplied to external organisations or bodies e.g. Courts, Bailiffs, Department of Work and Pensions, Inland Revenue and any other charging authority that is legally entitled to the information and may also be disclosed to the Council's external auditors for the following purposes:

- The prevention or detection of crime;
- The apprehension or prosecution of offenders;
- The assessment or collection of any tax or duty in any case where failure to disclose would be likely to prejudice any of those matters;
- Data matching initiatives with other statutory bodies for the purposes of fraud prevention and detection.

All or part of the information you have provided may also be used for electoral registration purposes and by other Departments of the Council for purposes connected with the collection of Council debts or to assist in other statutory functions such as Environmental Health or Planning.

The Council may check information provided by you or information about you provided by a third party against other information held by the Council. The Council may also obtain information from third parties or provide information to them to check the accuracy of information supplied by you to the Council.

The Council may make a search (including making enquiries about principle directors) with a Credit Reference Agency. The Credit Reference Agency will keep a record of that search and may share the information with other businesses.

DATA PROTECTION ACT 1998 NOTIFICATION CLAUSE

DECLARATION – Please read carefully:

I am aware that the Council will create and maintain computer and paper records on me and that these records will be processed with the Data Protection Act 1998 and may be used for the purposes detailed above, both internally within the Council and to external bodies.

Under the Housing Act 1996 Part VI, S.171 and Part VII, S.214 it is an offence to knowingly or recklessly make a false statement in connection with an application for housing assistance from the Local Authority. It is also an offence to knowingly withhold information which the Local Authority has reasonably required of the applicant in order to fulfil its duties under the Housing Act 1996.

I confirm that the particulars given in this form are true and correct and I undertake to notify the Council of any changes in my circumstances.

I agree that Dartford Borough Council may make any enquiries necessary in order to verify this information and I agree to Dartford Borough Council disclosing any relevant information I have provided to any organisation who may need it to process my application for housing assistance.

Signed (Applicant): 	Signed (Spouse/Partner):
Date:	Date:

(To be signed by both applicants)

All personal data is kept accurate, up to date and secure to prevent accidental loss, destruction or damage. The extent of the measures taken by the Council will depend upon the sensitivity of the information. Personal data will not be kept for longer than is necessary for their purpose.

*You have a right of access to your personal data and the right to check and correct the information and may pursue a query or complaint on matters related to your personal data. Further information on your rights may be obtained by contacting:
The Data Protection Officer,
Dartford Borough Council,
Civic Centre,
Home Gardens,
Dartford,
Kent DA1 1DR*

Tel: 01322 343634 Fax 01322 343422

E-mail: dataprotection@dartford.gov.uk Website: <http://www.dartford.gov.uk>

**GUIDANCE NOTES – RESETTLEMENT INFORMATION – EXTRACT FROM:
REHABILITATION OF OFFENDERS ACT 1974**

The Rehabilitation of Offenders Act 1974 enables criminal convictions to become 'spent' or ignored after a 'rehabilitation period'.

After this period, with certain exceptions an ex-offender is not normally obliged to mention their convictions when applying for a job, obtaining insurance or when involved in criminal or civil proceedings.

The Act is more likely to help people with few and/or minor convictions because further convictions usually extend rehabilitation periods. People with many convictions, especially serious convictions, may not benefit from the Act unless the convictions are very old.

Rehabilitation periods:

The length of the rehabilitation period depends on the sentence given – not the offence committed. For a custodial sentence, the rehabilitation period is decided by the original sentence, not the time served. Custodial sentences of more than two-and-a-half years can never be spent.

The following sentences become spent after fixed periods from the date of conviction:

Sentence	Rehabilitation period People aged 17 or under when convicted	Rehabilitation period People aged 18 or over when convicted
Prison sentences ² of 6 months or less	3½ years	7 years
Prison sentences ² of more than 6 months to 2½ years	5 years	10 years
Borstal (abolished in 1983)	7 years	7 years
Detention centre (abolished in 1988)	3 years	3 years
Fines ³ compensation, probation ⁴ , community services ⁵ , combination ⁶ , action plan, drug treatment and testing, and reparation orders	2½ years	5 years
Absolute discharge	6 months	6 months

The *Crime and Disorder Act 1998* introduced a new custodial sentence for young people with different rehabilitation periods:

Sentence	Rehabilitation period People aged 12, 13 or 14 when convicted	Rehabilitation period People aged 15, 16 or 17 when convicted
Detention and training order of 6 months or less	1 year after the order expires	3½ years
Detention and training order of more than 6 months	1 year after the order expires	5 years

With some sentences the rehabilitation period varies:

Sentence	Rehabilitation period
Probation ⁷ , supervision, care order ⁸ , conditional discharge and bind-over	1 year or until the order expires (whichever is longer)
Secure training (abolished in 2000) and attendance centre orders	1 year after the order expires

Sentence	Rehabilitation period
Hospital order (with or without a restriction order)	5 years or 2 years after the order expires (whichever is longer)
Referral order	Once the order expires

Footnotes

- ¹ Cautions, reprimands and final warnings are not sentences with rehabilitation periods. However, the Government is intending to include them within the Act and give them a rehabilitation period of nil, which means that they become spent instantly. In the meantime, those people with only a caution on their criminal record can answer 'no' if asked whether they have a criminal record, because this is usually understood to mean convictions.
- ² Including suspended sentences, youth custody (abolished in 1988) and detention in a young offender institution (abolished for those under 18 years old in 2000 and for those aged 18-20 in 2001).
- ³ Even if subsequently imprisoned for fine default.
- ⁴ For people convicted on or after 3 February 1995. Probation orders are now called community rehabilitation orders.
- ⁵ Community service orders are now called community punishment orders.
- ⁶ Combination orders are now called community punishment and rehabilitation orders.
- ⁷ For people convicted before 3 February 1995.
- ⁸ Care orders in criminal proceedings were abolished by the Children Act 1989 and effectively replaced by a supervision order with residence requirement.

This hand out is intended as a guidance note to assist you in completion of your Choice-Based Lettings application form, if you are unsure about answering questions 10a, 10b, or 10c you may telephone NACRO (National Association for Care and Resettlement of Offenders) for further advice and guidance on the helpline number: 020 7840 6464.

IF YOU, OR SOMEONE YOU KNOW CANNOT READ THIS DOCUMENT BUT WOULD LIKE TO, PLEASE ADVISE US OF YOUR/THEIR SPECIFIC REQUIREMENTS AND WE WILL DO OUR BEST TO PROVIDE THE INFORMATION IN A SUITABLE FORMAT OR LANGUAGE.

Telephone: 01322 343624
Fax: 01322 343341
E-mail: information.officer.housing@dartford.gov.uk

ਜੇ ਤੁਸੀਂ, ਜਾਂ ਕੋਈ ਜਣਾ ਜੋ ਇਹ ਦਸਤਾਵੇਜ਼ ਪੜ੍ਹ ਸਕਦਾ ਨਹੀਂ ਹੈ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਆਪਣੇ ਖਾਸ ਜ਼ਰੂਰਤਾਂ ਬਾਰੇ ਦੱਸੋ, ਅਤੇ ਅਸੀਂ ਆਪਣੀ ਸਹੂਲਤ ਦੇ ਅਨੁਸਾਰ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕਰਨ ਦੀ ਕੋਸ਼ਿਸ਼ ਕਰਾਂਗੇ।

Τηλέφωνο: 01322 343624
Φαξ: 01322 343341
E-mail: information.officer.housing@dartford.gov.uk

Αν εσείς, ή κάποιος που γνωρίζετε, δεν μπορείτε να διαβάσετε το έγγραφο αυτό, αλλά θέλετε να το διαβάσετε, παρακαλώ πληροφορηθείτε μας για τις συγκεκριμένες σας απαιτήσεις και εμείς θα κάνουμε κάθε τι το δυνατό να κανονίσουμε να μεταφράσουμε τις πληροφορίες που θέλετε, στη γλώσσα σας.

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Φαξ: 01322 343341
E-mail: information.officer.housing@dartford.gov.uk

Sir ya da tanıdığınız birisi bu belgeyi okumak istediğiniz halde okuyamıyorsanız, lütfen bu konudaki isteğinizi bize bildirin. Burada yer alan bilgileri uygun şekilde size iletebilir, istediğiniz dilde size gönderebiliriz.

Telefon: 01322 343624
Faks: 01322 343341
E-posta: information.officer.housing@dartford.gov.uk

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আপনি অথবা আপনি জানেন এমন কেউ যদি এই ডকুমেন্টটি পড়তে না পারেন কিংবা এটা পড়তে চান, তাহলে দয়া করে আপনার/উঁদের নির্দিষ্ট প্রয়োজনীয়তার ব্যাপারে আমাদেরকে জানতে দিন এবং আমরা এই তথ্যাদি উপযুক্ত ভাষায় বা ভাষায় প্রদান করার জন্য আমাদের দ্বারা সম্ভব চেষ্টা করব।

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اگر آپ یا آپ کا کوئی جاننے والا شخص اس دستاویز کو پڑھ سکتا ہے، تو براہ کرم ہمیں اپنے مخصوص ضرورتوں کے بارے میں بتائیں اور ہم آپ کی زبان میں اسے پیش کرنے کی کوشش کریں گے۔

01322 343624
01322 343341
information.officer.housing@dartford.gov.uk

Pe ce se ju ose năsunje persoa ce ajită, nuk mund te lezaje kete dăkument per de te deshirante ta lezante, ju lutem te ax năstfosi per kerkesen taun/tyre te vecante dhe ne do te mundohemi ju japim informacionin ne aje menyre te perktatashme ose te perkthyer.

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यदि आप, या आप को पहचान का कोई अन्य व्यक्ति, इस दस्तावेज़ को पढ़ न सकेता हो, तबपु मया प्रारण हो, तो कृपया हमें आपकी/आपकी विशेष आवश्यकताओं के बारे में हम को बताने की कृपा कीं ता हम यह जानकारी उपयुक्त रूप या भाषा में प्रदान करने का कोशिश प्रदान करे।

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如果你或你認識的某人看不懂這份文件，但想知道文件的內容，請告訴我們你或他們的特別需要，我們會儘量以適合的格式或語言提供這些信息。

電話: 01322 343624
傳真: 01322 343341
電子郵件: information.officer.housing@dartford.gov.uk