



**GOVANHILL**  
HOUSING ASSOCIATION

Office Use:

Size

Wait / Trans / Sect 5 / S West

Ref

# HOUSING APPLICATION FORM

## You

Title (Mr, Mrs, Miss etc)

First Name

Surname or Family Name



PHOTO I.D.  
REQUIRED

Date of Birth (DD/MM/YYYY)

National Insurance Number

Phone Number

Mobile

Email Address

Current Address and Postcode



PROOF  
REQUIRED

Postcode

Date You Moved In

Correspondence address (if different from above)

## Joint Applicant

Title (Mr, Mrs, Miss etc)

First Name

Surname or Family Name



PHOTO I.D.  
REQUIRED

Date of Birth (DD/MM/YYYY)

National Insurance Number

Phone Number

Mobile

Relationship to Main Applicant

Current Address and Postcode



PROOF  
REQUIRED

Postcode

Date You Moved In

Correspondence address (if different from above)

## Specific Housing

Office Use:

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

Amenity housing  Sheltered housing  Housing with access for wheelchairs  General housing

**Would your new home need any adaptations to meet your needs?**

No  Yes  If yes, please provide details below

**If you require sheltered housing, please tell us how you would benefit?**

## Support

**Do you need to move to give or receive support?**

No  Yes

If yes, please give details

Name of person you support or who supports you

Relationship to you

Address

Phone number

Please detail the support arrangements

**Do you want to move nearer a relative?**

No  Yes

If yes, please give details

Name of relative

Relationship to you

Address

Phone number

Why do you need to be near a relative?

**Who is your doctor (your GP)?**

Their name

Address

Phone number

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

No  Yes

Office Use:

If yes, please give details

Their name

Occupation

Organisation

Address

Phone number

What support do they provide?

**Do you need to move closer to work, further education, or receive training?**

No  Yes

If yes, please give details

## Asylum and Immigration

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

### You

### Joint Applicant

**Are you under immigration control?**

No  Yes

**IF YES PROOF REQUIRED** 

**Are you under immigration control?**

No  Yes

**IF YES PROOF REQUIRED** 

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

No  Yes  Please provide details

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

No  Yes  Please provide details

## Medical Priority

Office Use:

In this section, please tell us if you or anyone who will be living with you has a medical condition that is affected by your current home. We may have to contact your doctor to verify the information you provide or for advice regarding the medical condition and rehousing requirements . ***Please provide as much information as possible.***

Name 1

What is the medical condition?

Please explain - how is it affected by your current home?

What type of accommodation would improve the condition?

Name 2

What is the medical condition?

Please explain - how is it affected by your current home?

What type of accommodation would improve the condition?

## Your Housing Details

Office Use:

### 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 16.

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

**People who will be moving with you (continued)**

Office Use:

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>Full name</b>	<b>Current address and postcode</b>
<input type="text"/>	<input type="text"/>
<b>Date of Birth (DD/MM/YYYY)</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"/>
<b>Relationship to you</b>	<b>Date they moved in</b>
<input type="text"/>	<input type="text"/>
Male <input type="checkbox"/> Female <input type="checkbox"/>	

## Previous Addresses — You

Office Use:

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

**Address**

**Date moved in (DD/MM/YYYY)**

**Date moved out (DD/MM/YYYY)**

**Postcode**

**Landlord's name and address (if applicable)**

**Why did you move out?**

**Address**

**Date moved in (DD/MM/YYYY)**

**Date moved out (DD/MM/YYYY)**

**Postcode**

**Landlord's name and address (if applicable)**

**Why did you move out?**

**Address**

**Date moved in (DD/MM/YYYY)**

**Date moved out (DD/MM/YYYY)**

**Postcode**

**Landlord's name and address (if applicable)**

**Why did you move out?**

**Address**

**Date moved in (DD/MM/YYYY)**

**Date moved out (DD/MM/YYYY)**

**Postcode**

**Landlord's name and address (if applicable)**

**Why did you move out?**

## Previous Addresses — Joint Applicant

Office Use:

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

<b>Address</b>		<b>Date moved in (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		<b>Date moved out (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Postcode</b>	<input type="text"/>	<b>Landlord's name and address (if applicable)</b>			
<b>Why did you move out?</b>		<input type="text"/>			
<input type="text"/>					

<b>Address</b>		<b>Date moved in (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		<b>Date moved out (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Postcode</b>	<input type="text"/>	<b>Landlord's name and address (if applicable)</b>			
<b>Why did you move out?</b>		<input type="text"/>			
<input type="text"/>					

<b>Address</b>		<b>Date moved in (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		<b>Date moved out (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Postcode</b>	<input type="text"/>	<b>Landlord's name and address (if applicable)</b>			
<b>Why did you move out?</b>		<input type="text"/>			
<input type="text"/>					

<b>Address</b>		<b>Date moved in (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>		<b>Date moved out (DD/MM/YYYY)</b>			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Postcode</b>	<input type="text"/>	<b>Landlord's name and address (if applicable)</b>			
<b>Why did you move out?</b>		<input type="text"/>			
<input type="text"/>					



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

Office Use:

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

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

Full name

Date of birth (DD/MM/YYYY)

--	--	--	--	--	--	--	--

Relationship to you

Male

Female

## Your Current Amenities

Office Use:

Tick the boxes to show if you don't have or share (with people who are not part of your household) any of these amenities in your current home:

	Do not have	Share		Do not have	Share
<b>Living room</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Cold water supply</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Hot water supply</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Inside toilet</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Bath or shower</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Kitchen</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Bathroom</b>	<input type="checkbox"/>	<input type="checkbox"/>			

If you share amenities with others, how many people do you share with?

What type of heating do you have? Please tick one box:

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

## Your Current Circumstances — Applicant

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

**Are you?:**

A Govanhill Housing Association tenant	<input type="checkbox"/>	Renting from a private landlord	<input type="checkbox"/>
A tenant with another housing association	<input type="checkbox"/>	Living with parents	<input type="checkbox"/>
A council tenant	<input type="checkbox"/>	An owner occupier	<input type="checkbox"/>
Living with friends or relatives	<input type="checkbox"/>	In hospital	<input type="checkbox"/>
A lodger	<input type="checkbox"/>	Living in a caravan	<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"/>	Living in accommodation provided by your job	<input type="checkbox"/>
		Date you will leave the forces	<input type="checkbox"/>

**PROOF REQUIRED**  


## Current Tenure

If you are a tenant, please provide details of your current landlord

Name

Address

Do you have a tenancy agreement?

**PROOF REQUIRED** 

**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 flat)	<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"/>	Studio flat	<input type="checkbox"/>


Office Use:

**How many bedrooms does your present home have?**      Single       Double

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

**If yes, on what date do you need to move out? (DD/MM/YYYY)**

**Please tell us why you need to move:**

**Is there a closing order over your present accommodation?**      No       Yes       **IF YES, PROOF REQUIRED** 

**If there are any faults in your home that makes 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.**

## Social factors

Office Use:

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 confidential.

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

Do you have access to children who may come and stay with you?

No

Yes

IF YES, PROOF  
REQUIRED



Please provide details

Are you, or anyone who is living with you expecting a baby?

No

Yes

PROOF  
REQUIRED OF  
DUE DATE

If yes, who is expecting the baby?

When is the baby due?

## Anti-social Behaviour

Office Use:

**Has action for anti-social behaviour ever been taken against you or anyone who will live with you?**

No  Yes  (If yes, please answer the questions below)

**Was court action taken?**

No  Yes  Date of case   
Name of court

**Was other action taken?**

No  Yes

**Was an anti-social behaviour order (ASBO) made?**

No  Yes

**Do you or anyone on your application form have to register with the police as a relevant offender under the Sexual Offences Act 2003?**

No  Yes

If you or any member of your household must register under the Sexual Offenders Act 2003, you should send your form directly to

**Housing Services Manager, Govanhill Housing Association,  
79 Coplaw Street, Glasgow G42 7JG.**

*This does not mean that your application will get any less favourable treatment than you would otherwise receive.*

## Street Choices

Office Use:

Street	✓	Street	✓
Aikenhead Road		Jamieson Court (sheltered housing complex), including Jamieson Path and Cathcart Road	
Allison Street (west of Cathcart Road)			
Allison Street (east of Cathcart Road)		Langside Road (north of Calder Street)	
Annandale Street		Langside Road (south of Calder Street)	
Annette Street		Preston Street	
Ascog Street		Riccarton Street	
Ardbeg Street		Seath Street	
Bankhall Street		South Annandale Street	
Batson Street (north of Govanhill Street)		Victoria Road	
Batson Street (south of Govanhill Street)		Westmoreland Street	
Bennan Square			
Boyd Street			
Brereton Street			
Butterbiggins Road			
Calder Street (west of Cathcart Road)			
Calder Street (east of Cathcart Road)			
Carfin Street			
Cathcart Road (north)			
Cathcart Road (south)			
Coplaw Court			
Coplaw Street			
Cuthbertson Street		Merrylee	
Daisy Street		Ashmore Crescent	
Dixon Avenue		Ashmore Road	
Dixon Road		Burrelton Road	
Garturk Street		Cherrybank Road	
Govanhill Street (east of Cathcart Road)		Friarton Road	
Govanhill Street (west of Cathcart Road)		Glasserton Place	
Hickman Street (north of Calder Street)		Glasserton Road	
Hickman Street (south of Calder Street)		Merrylee Road	
Hickman Terrace		Muirskeith Crescent	
Hollybrook Street (north of Govanhill Street)		Muirskeith Place	
Hollybrook Street (south of Govanhill Street)		Muirskeith Road	
		Newlands Road	
Inglefield Street			
Jamieson Street			
Kingarth Street			

## The Housing You Want

Office Use:

### What size of property would you consider?

The Association's allocation policy will decide what property size you are eligible for.

Would you consider a bedsit?

No

Yes

Would you consider a combined living room/kitchen?

No

Yes

### What kind of heating would you accept?

Gas central heating

Electric central heating

### What cooking facilities do you prefer?

Either

Gas cooking

Electric cooking

### What type of property do you want?

Four in a block  
(ground floor)

Flat (ground floor)

Maisonette

Four in a block  
(upper floor)

Flat (upper floor)

House

### Which floor levels would you accept?

Please tick:

Ground

First

Second

Third

Four or more with a lift

## Other Information

Office Use:

Please detail any other information you feel may be relevant to your application



## Equal Opportunities

Office Use:

Govanhill Housing Association is committed to open and equal access for everyone who is looking for housing from us. We monitor all applications for housing to make sure they reflect the needs of the population that we serve. You can help us to monitor equal opportunities by providing the following information. Please note, that your application will not be affected in any way if you choose not to answer any of these questions.

**How would you describe the ethnic origin of your household?  
Please tick the appropriate box.**

White	Asian
Scottish <input type="checkbox"/>	Indian <input type="checkbox"/>
Other British <input type="checkbox"/>	Pakistani <input type="checkbox"/>
Irish <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>
Gypsy / Traveller <input type="checkbox"/>	Chinese <input type="checkbox"/>
Polish <input type="checkbox"/>	Any other Asian background <input type="checkbox"/>
Any other white background <input type="checkbox"/>	

Black, black Scottish, or black British	Other ethnic background
Caribbean <input type="checkbox"/>	Arab, Arab Scottish or Arab British <input type="checkbox"/>
African <input type="checkbox"/>	Mixed or Multiple ethnic background <input type="checkbox"/>
Any other black background <input type="checkbox"/>	Any other background <input type="checkbox"/>
	I would prefer not to answer this question <input type="checkbox"/>

**What is your preferred language?**

**Please tell us your nationality**

**Please tell us the nationality of the joint applicant (if applicable)**

### Disability

**Do you consider yourself disabled?**

No  Yes

## Declaration

Are you related to a committee member or an employee of Govanhill Housing Association? (please tick)

No

Yes

If yes, what is their relationship to you?

Please provide their name and address

Name

Address

## Privacy Notice

Govanhill Housing Association Limited has registered under the Data Protection Act to enable us to process personal information about housing applicants and other service users. The Association must comply with the conditions set out in the Act.

You have the right to apply for a copy of the information we hold about you and to have any inaccuracies corrected. The Association may charge a fee for providing the information; the fee is limited by statute.

We use information from applicants and tenants for a range of purposes relating to our housing list and tenancy management. We will also use the information to provide statistical data to our Management Committee, the Scottish Housing Regulator, and other interested parties. We will always respect the confidentiality of the information you provide.

We may also use the information if you are successful in obtaining housing from Govanhill Housing Association. Your application details will be kept on file as "history notes".

While you are on our housing list, and during any subsequent tenancy you have with the Association, we may add to or modify the information provided by you or others, for example, your landlord.

We may disclose your personal information to local authorities, police and other statutory bodies but only if they have a legal entitlement to the information. We may also share this information with local authorities in respect of matters relevant to a tenancy, or if you are claiming or receiving housing benefit.

**By returning this form to us you consent to processing personal data about you in accordance with the Data Protection Act 1988.**

## Please read this declaration carefully

- I confirm that the details I have given on this application form are true and accurate.
- I understand that if my circumstances change, I must tell the Association.
- I understand that if I give any false or misleading information, my application will be cancelled.
- If I get a tenancy based on false or misleading information, I understand the Association may take court action to evict me.
- I understand that the Association can ask for a reference from any landlord or mortgage lender I have had. I authorise these landlords or mortgage lenders to provide any information required in connection with my 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 will have to make a new application.
- 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 .....

Staff member ..... Date .....

## Proof Required



**PROOF  
REQUIRED**

Please ensure all documentation is provided, otherwise we cannot fully assess your housing requirements and your application will be returned to you.

### Please see below types of proof we will accept:

Applicant 1	Photo identification (e.g. passport, driving licence)	Office Use:
Applicant 2	Photo identification (e.g. passport, driving licence)	
Applicant 1	Proof of address x 2 (e.g. bank statement, benefits award letter, utility bill)	
Applicant 2	Proof of address x 2 (e.g. bank statement, benefits award letter, utility bill)	
Applicant 1	* If required, proof of immigration status. All documentation from the UK Home Office	
Applicant 2	* If required, proof of immigration status. All documentation from the UK Home Office	
Applicants or members of household who are pregnant	Proof of estimated due date	
Other household members	Proof of Address	
Applicant address	proof of tenancy / ownership at current address	

We will consider the following examples of types of documentary proof:

Utility Bill, Tax Credit letter, Child Benefit letter, Medical Card, Job Seekers Allowance letter, Council Tax letter, Bank Statement, Drivers Licence, NHS letters (Hospital Appointments), HM Revenue and Customers — Tax for year, Payslips, Invoice receipt, Housing Benefit letter.

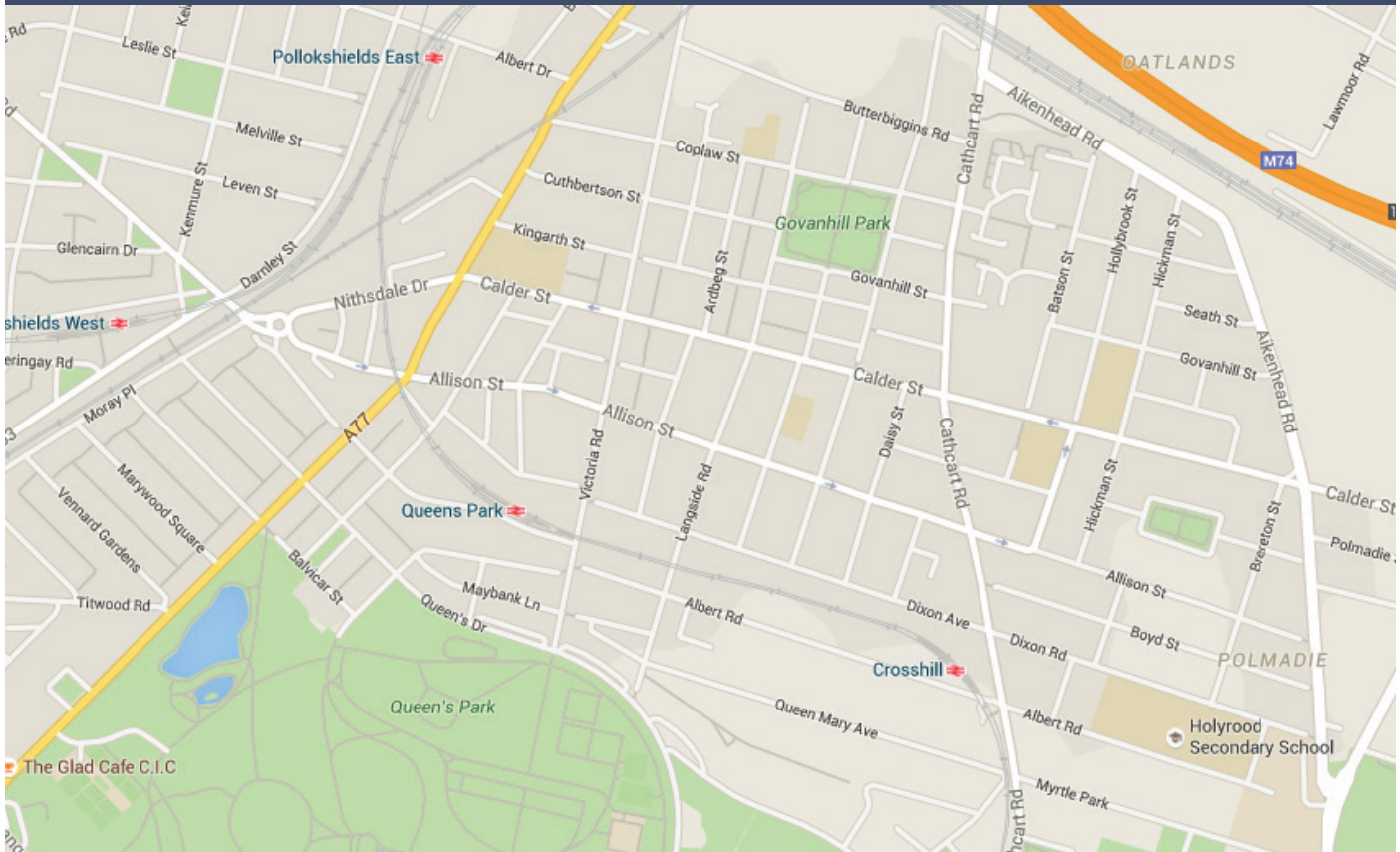
All documents **must** be from the address you are applying for housing.

**You must fill in as much detail as possible to make sure we assess your housing need correctly. Where you see this symbol, it means you are required to provide two forms of documentation as evidence. We require photographic identification (eg passport or full driving licence). We also require proof of address. For example, full driving licence or bank statements.**

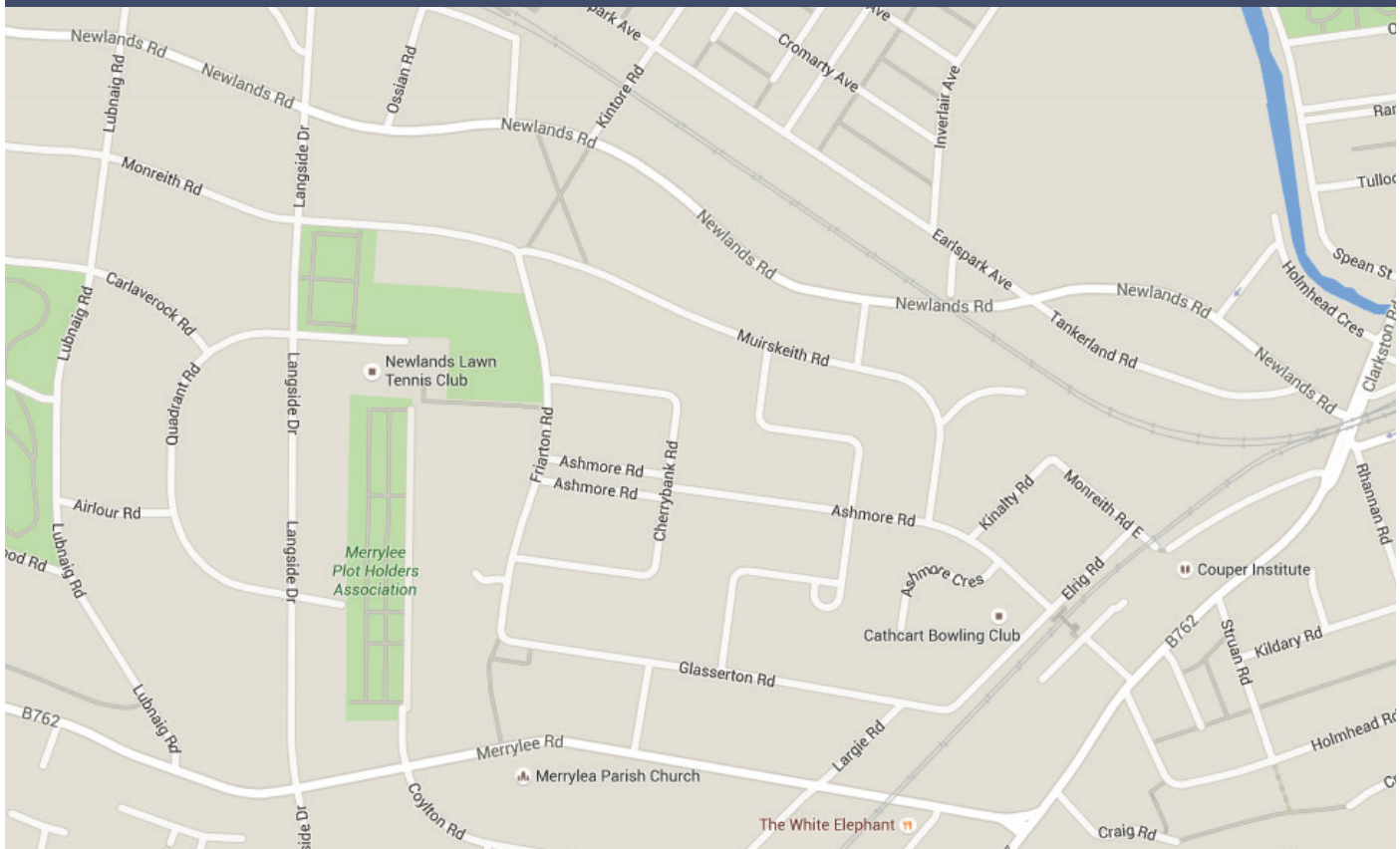


**PROOF  
REQUIRED**

**Govanhill lies to the south of the City Centre, to the east of Pollokshaws Road, close to Queens Park**



**Merrylee lies to the south of the City Centre, between Cathcart Road and Kilmarnock Road, close to Cathcart and Shawlands**











Govanhill Housing Association  
Samaritan House  
79 Coplaw Street  
GLASGOW  
G42 7JG

General Enquiries - 0141 636 3636

Govanhill Housing Association is a Registered Charity No. SCO10307

