

application for membership

Good 
Tenants'
Scheme

Name of referring agency:

(1) Personal Details

Please complete two separate forms if you are a joint tenant or cohabitee.

Your Details:

Mr/Mrs/Miss/Ms/Other:

First Name(s):

Last Name:

Maiden or Previous Surname:

Date of Birth: / /

Age:

National Insurance number:

Place of Birth:

Address:

How long have you lived at this address:

Which of the following best describes your current situation with regards to the above address? (Tick one box only)

I am the home owner I am a Housing Association Tenant I am privately renting I am staying with parents

I am staying with friends Other (please specify)

Telephone (Home):

Work:

Mobile:

Email:

(2) What is your current landlord's name and address?

Name:

Address:

Telephone (Home):

Work/Mobile:

Do you have any pets? Yes No If yes, what kind and how many?

Address you are moving to (if applicable):

Area you would like to move to:

Number of bedrooms required:

(3) Reason for moving? Please include any health reasons (if applicable).

(4) Housing History Please use separate sheet if required.

Where have you lived in the last three years? (If applicable, excluding your present address)

Address:	Landlord's/cohabitee's name, address & telephone No:	Dates: (from – to)	Reason for leaving:	Did you own/rent/stay with friends/parents etc.

Has anyone on the tenancy ever lived in, or been a tenant of a Housing Association or Local Authority? Yes No If yes, please give details of the address of the property and which Housing Association or Local Authority the house belonged to?

(5) Income Details

Job title: Full time Part time

Employer: Work Tel:

Full Address:

Take Home Pay: £ per **Do you receive any income from state benefits/pension?** Yes No

If yes please describe: Amount: £ per

Under the Data Protection Act 1998 this information is classified as sensitive data and will only be disclosed with your written authorisation.

(6) Who else will be living with you?

Please give details of everyone who will be moving in with you. Do not include yourself.

First name	Last name	Address	Male/Female	Date of birth	Relationship to applicant

Does anyone else come to stay with you for part of the week? (eg a child that you see at weekends)

Please give details below.

First name	Last name	Address	Male/Female	Date of birth	Relationship to applicant

(7) Equal Opportunities

Your application will not be treated any differently because of your sex, race, ethnic or national origin. Please tick one box only to describe your ethnic origin.

- White British
 Irish
 Other
- Mixed White & Black Caribbean
 White & Black African
 White & Asian
 Other
- Asian or Asian British Indian
 Pakistani
 Bangladeshi
 Other
- Black or Black British Caribbean
 African
 Other
- Chinese or other ethnic group Chinese
 Other
- Refused

Is there any other member of your household who is of a different ethnic group to yourself? Yes No

This information is collected under the Data Protection Act 1998 and will be used for equal opportunities monitoring only.

(8) Declaration of Consent

I can confirm that I have read the details of the Good Tenants' Scheme criteria and I understand that enquiries will be carried out concerning my past character and conduct of any present or previous tenancies or occupations of any property.

I am aware that enquiries may be made to Housing Associations, Private Landlords, Local Authorities and the Police and by signing this declaration I give my permission and consent for the Good Tenants' Scheme to obtain any relevant information.

I understand that the reference information requested by the Good Tenants' Scheme will relate to rent arrears, Housing Benefit claims/overpayments, damage to property, nuisance/ anti-social behaviour, abandonment or other breach of tenancy conditions and any relevant criminal activity.

I understand that reference information and personal data will be used for the *SOLE* purpose of assessing suitability for inclusion in the Good Tenants' Scheme and will be held in the strictest confidence under the terms of the Data Protection Act 1998.

This information may also be used for prevention and detection of a crime, to protect public files and for debt tracing.

Name:

Signature:

Date:

Please remember to sign this declaration, as unsigned applications will be returned.

***For office
use only:***

Please return your completed form to:

Good Tenants' Scheme
Accent Regeneration Ltd
3rd Floor, Stephen House
Bethesda Street
Burnley, BB11 1PR



Neighbourhood
Renewal Unit



European Regional
Development Fund



accent regeneration

in partnership with

