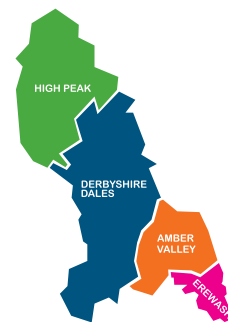


Home-Options

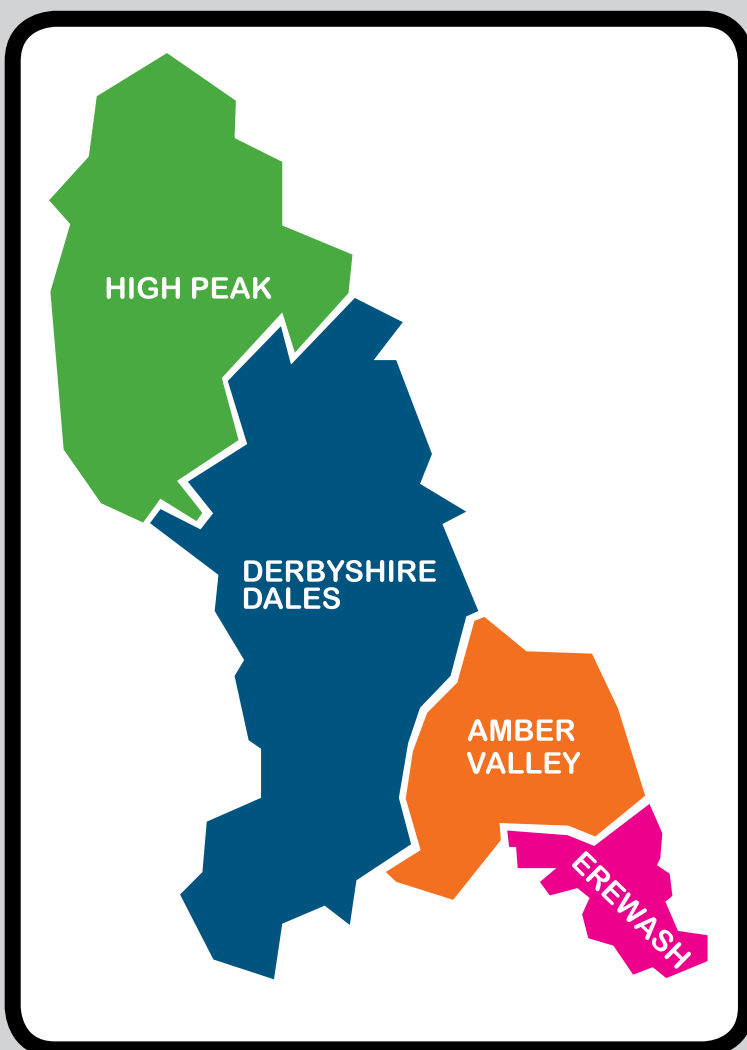
www.home-options.org



Home-Options Application Form

Where do you want to live?

Please tick the Home-Options area you would like to live. If you tick more than one area your application will be held by the Home-Options office closest to your current address. For advice and assistance regarding Home-Options contact the area you wish to live or closest Home-Options office:



Information given on this form will be treated confidentially and will only be used for the purpose of registering applications for rehousing and assessing housing need.

For office use only

Name

Application N ^o

For applicants seeking Accommodation within High Peak:

High Peak Community Housing
Municipal Buildings, Glossop
Derbyshire, SK13 8AF
Tel: 0845 1298075

Tick

For applicants seeking Accommodation within Derbyshire Dales:

Derbyshire Dales District Council
Town Hall, Matlock
Derbyshire, DE4 3NN
Tel: 01629 761311 or 761117

Tick

For applicants seeking Accommodation within Amber Valley:

PO Box 6458, Asher Lane,
Ripley, Derbyshire. DE5 3BF.
Tel: 01773 573100

Tick

For applicants seeking Accommodation within Erewash:

Three Valleys Housing
Three Valleys House
Bramley Road, Long Eaton
Derbyshire, NG10 3SX
Tel: 0844 7703500

Tick

1. Have you and the joint applicant/partner lived in the UK all of your lives?

Yes - If Yes go to **question 5**

No - If No go to **question 2**

2. What Country is your current passport issued from?

3. An EU Citizen? (Please state country of origin)

4. Not an EU Citizen? (Please state country of origin)

5. Are you or anyone on your application seeking asylum in the UK?

Yes

No

If so have you or is anyone included on your application.....

Been granted refugee status by the Home Office

Been granted exceptional leave to remain in the UK

Start date of exceptional leave

Expiry date

Been given indefinite leave to remain in the UK

Were you being sponsored? Yes No

Sponsor still alive? Yes No

None of the above

Can't read this?

This form is available in Braille or large print from your housing office. Telephone translation service is available from your housing office and also translations are also available in:

Gujarati

વિનંતિ કરવાથી, જુદી જુદી ભાષાઓ, અંધલિપિ (બ્રેઇલ) અને મોટા છપેલા અક્ષરોમાં અમારી પાસેથી પ્રકાશિત થયેલ માહિતી મળી શકે. જે લોકો ઈંગ્લિશ બોલતા ન હોય તેઓને માટે અમારી પાસે ઇન્ટરપ્રિટીંગની સગવડતાઓ પણ હોય છે.

Hindi

प्रकाशित जानकारी अनुरोध पर हम अन्य भाषाओं, ब्रेल और बड़े अक्षरों की छपाई में उपलब्ध करा सकते हैं। जो लोग अंग्रेजी नहीं बोल सकते उनके लिये अनुवाद (इंटरप्रेटिंग) सुविधाएं भी हमारे यहां मौजूद हैं।

Mandarin

所发布信息可有多种语言版本，如有需要，也可提供盲文和较大字体版本。如不说英文，我们也提供口译服务。

Polish

Możemy udostępnić publikowane informacje w różnych językach, w wersji brajlem i dużym drukiem. Dysponujemy również usługami tłumaczeniowymi dla osób, które

Punjabi

ਮੰਗ ਆਉਣ 'ਤੇ ਅਸੀਂ ਛਪੀ ਹੋਈ ਜਾਣਕਾਰੀ ਅਸੀਂ ਕਈ ਵੱਖ ਵੱਖ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਬ੍ਰੇਲ ਲਿਪੀ ਵਿਚ ਅਤੇ ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ ਦੇ ਸਕਦੇ ਹਾਂ। ਜਿਹੜੇ ਲੋਕ ਅੰਗਰੇਜ਼ੀ ਨਹੀਂ ਬੋਲ ਸਕਦੇ, ਉਹਨਾਂ ਨੂੰ ਗੱਲਬਾਤ ਸਮਝਣ ਅਤੇ ਸਮਝਾਉਣ ਵਿਚ ਮਦਦ ਦੇਣ ਲਈ ਅਸੀਂ ਇੰਟਰਪ੍ਰੈਟਰਾਂ ਦਾ ਖੁਬੰਧ ਵੀ ਕਰ ਸਕਦੇ ਹਾਂ।

Urdu

ہم شائع معلومات کو طلب کرنے پر مختلف زبانوں، بریل اور بڑے حروف میں مہیا کر سکتے ہیں۔ ہمارے پاس ان لوگوں کیلئے مترجم کی سہولیات بھی ہیں جو انگریزی میں بات چیت نہیں کر سکتے۔

Applicant details

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female
First name	<input type="text"/>				Last Name	<input type="text"/>	
Date of Birth	<input type="text"/>		N.I. no	<input type="text"/>			

Your application will not be processed without a National Insurance number.

Do you currently live in any of the following Home-Options areas and have done so for the last 6 months?

High Peak	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Derbyshire Dales	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Amber Valley	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Erewash	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Economic Status

<input type="checkbox"/> Working full time (30 hours+)	<input type="checkbox"/> Working Part time (less than 30 hours)
<input type="checkbox"/> Government training/New Deal	<input type="checkbox"/> Job Seeker
<input type="checkbox"/> Retired	<input type="checkbox"/> Not seeking work
<input type="checkbox"/> Unable to work due to sickness/disability	<input type="checkbox"/> Other

Do you currently have permanent employment of 16 hours or more in any of the following Home-Options areas and have done so for the last 6 months?

High Peak	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Derbyshire Dales	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Amber Valley	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Erewash	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I do not work in any of the above areas			<input type="checkbox"/> Yes	<input type="checkbox"/> No	

If you work please provide Employment details - Applicant (only).

Job Title	<input type="text"/>		
Employer Name	<input type="text"/>		
Employer Address	<input type="text"/>		
	<input type="text"/>		
Date From	<input type="text"/>	Applicant Monthly Income	<input type="text"/>
Applicant Annual Income	<input type="text"/>		

How would you describe your ethnic origin?

<input type="checkbox"/> White British	<input type="checkbox"/> Mixed Other	<input type="checkbox"/> Indian or British Indian
<input type="checkbox"/> White Irish	<input type="checkbox"/> Chinese	<input type="checkbox"/> Pakistani or British Pakistani
<input type="checkbox"/> White Other	<input type="checkbox"/> Black Caribbean or British Black Caribbean	<input type="checkbox"/> Bangladeshi or British Bangladeshi
<input type="checkbox"/> Mixed White & Black Caribbean	<input type="checkbox"/> Black African or British Black African	<input type="checkbox"/> Asian or British Asian Other
<input type="checkbox"/> Mixed White & Black African	<input type="checkbox"/> Black or Black British Other	<input type="checkbox"/> Other
<input type="checkbox"/> Mixed White & Asian		

Joint applicant/Partner Details

Title Mr Mrs Miss Ms Sex Male Female

First name
 Last Name
 Date of Birth N.I. no

Relationship to Applicant

Partner Child Relative Other Dependant Other

Do you currently live in any of the following Home-Options areas and have done so for the last 6 months?

High Peak Yes No Derbyshire Dales Yes No
 Amber Valley Yes No Erewash Yes No

Joint Applicant/Partner Economic Status

Working Full Time (30+hrs) Not Seeking Work Job Seeker
 Government Training/New Deal Working Part Time (Less than 30hrs) Retired
 Unable to Work due to sickness/disability Other

Do you currently have permanent employment of 16 hours or more in any of the following Home-Options areas and have done so for the last 6 months?

High Peak Yes No Derbyshire Dales Yes No
 Amber Valley Yes No Erewash Yes No
 I do not work in any of the above areas Yes No

If you work please provide Employment details - Joint Applicant / Partner.

Job Title
 Employer Name
 Employer Address
 Date From
 Applicant Annual Income Applicant Monthly Income

How would you describe your ethnic origin?

White British Mixed Other Indian or British Indian
 White Irish Chinese Pakistani or British Pakistani
 White Other Black Caribbean or British Black Caribbean Bangladeshi or British Bangladeshi
 Mixed White & Black Caribbean Black African or British Black African Asian or British Asian Other
 Mixed White & Black African Black or Black British Other Other
 Mixed White & Asian

Other People to be rehoused with you

Person 1

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Sex	Male <input type="checkbox"/>	Female <input type="checkbox"/>
First name	<input type="text"/>			Last Name	<input type="text"/>		
Date of Birth	<input type="text"/>		N.I. no	<input type="text"/>			
Relationship to you	<input type="text"/>		Economic Status	<input type="text"/>			
Occupation	<input type="text"/>						

Is this additional person living with you?

Permanently Yes No Part-time Yes No Not living with you Yes No

If you have answered part time how many nights a week do they live with you?

If not currently living with you explain why?

Is this person currently included on your current tenancy agreement? Yes No

Will this person be included on any future tenancy agreement? Yes No

This data will be held against each individual household member.

Person 2

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Sex	Male <input type="checkbox"/>	Female <input type="checkbox"/>
First name	<input type="text"/>			Last Name	<input type="text"/>		
Date of Birth	<input type="text"/>		N.I. no	<input type="text"/>			
Relationship to you	<input type="text"/>		Economic Status	<input type="text"/>			
Occupation	<input type="text"/>						

Is this additional person living with you?

Permanently Yes No Part-time Yes No Not living with you Yes No

If you have answered part time how many nights a week do they live with you?

If not currently living with you explain why?

Is this person currently included on your current tenancy agreement? Yes No

Will this person be included on any future tenancy agreement? Yes No

This data will be held against each individual household member.

Other People to be rehoused with you

Person 3

Title	Mr <input type="checkbox"/>	Mrs <input type="checkbox"/>	Miss <input type="checkbox"/>	Ms <input type="checkbox"/>	Sex	Male <input type="checkbox"/>	Female <input type="checkbox"/>
First name	<input type="text"/>			Last Name	<input type="text"/>		
Date of Birth	<input type="text"/>		N.I. no	<input type="text"/>			
Relationship to you	<input type="text"/>		Economic Status	<input type="text"/>			
Occupation	<input type="text"/>						

Is this additional person living with you?

Permanently Yes No Part-time Yes No Not living with you Yes No

If you have answered part time how many nights a week do they live with you?

If not currently living with you explain why?

Is this person currently included on your current tenancy agreement? Yes No

Will this person be included on any future tenancy agreement? Yes No

This data will be held against each individual household member.

For additional persons please continue on a separate sheet

Where you live now

Present Address

Correspondence Address (if different)

Date you moved in

Parish

Tel Day

Tel Eve

Mobile

Email address

Does the joint applicant/partner live at a different address to you the applicant?

Yes No

If yes please provide address details

Please state why you and the joint applicant / partner are residing at different addresses.

Do you or the joint applicant/partner owe rent arrears or former rent arrears at this address or any previous address? Yes No

If yes please provide details

In your current accommodation.

How many bedrooms do you have?

(Include all bedrooms even if used for other purposes (e.g. office, study etc)

How many other people are living in your current accommodation that won't be moving with you?

Please list all those living with you but not moving with you.

Name	Age	Sex	Relationship to you	Which bedroom do they occupy? E.g. 1,2 or 3

Tick which of these best applies to where you live now

- | | | |
|---|--|--|
| <input type="checkbox"/> Local-authority tenant | <input type="checkbox"/> Tied home or renting with job | <input type="checkbox"/> Direct access hostel |
| <input type="checkbox"/> Owner Occupier | <input type="checkbox"/> Approved probation hostel | <input type="checkbox"/> Children's home / foster care |
| <input type="checkbox"/> Residential care home | <input type="checkbox"/> Other temporary accommodation | <input type="checkbox"/> Private rented |
| <input type="checkbox"/> Bed and Breakfast | <input type="checkbox"/> Sleeping rough | <input type="checkbox"/> Sheltered or retirement housing |
| <input type="checkbox"/> Staying with friends | <input type="checkbox"/> Shared Ownership | <input type="checkbox"/> Prison |
| <input type="checkbox"/> Housing Association Tenant | <input type="checkbox"/> Supported Housing | <input type="checkbox"/> Living with family |

Other

If you rent, what type of tenancy agreement do you have?

- | | | |
|----------------------------------|---|--|
| <input type="checkbox"/> Secure | <input type="checkbox"/> Assured Shorthold | <input type="checkbox"/> Accommodation tied with your employment |
| <input type="checkbox"/> Assured | <input type="checkbox"/> Temporary homeless/ Non-secure | |

Please give your rent account number

Your Current landlord details:

Landlord Name

Address1

Address2

Address3

Town Postcode

Contact Number

Where you live now

Type of Accommodation: (Please tick the type of accommodation you live in now.)

- House Flat Maisonette Bungalow Room Only Caravan
 Mobile Home Bedsit Other

If your home is a flat or bedsit, please tell us which floor it is on (Please tick one box)

- Basement Ground Floor First Floor Second Floor Higher

Which best describes the facilities where you live now?

	Have sole use	Share with another family/ household	Do not have at all
Kitchen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inside Toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electricity Supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Owner Occupier:

Complete this question if you are an owner occupier or have shared ownership. Include any property in the UK or abroad that you or your joint applicant/partner own, part own or lease. If you or your joint applicant/partner are Owner Occupiers please estimate:

The value of **ANY** property or land you own

£

The mortgage you still have to pay

Amount £

Monthly

Weekly

If you are currently behind with your payments, tell us by how much.

£

What was the amount of your original mortgage?

£

How much is outstanding on your mortgage?

£

Who is your mortgage provider? (We may ask you to provide details of your mortgage including statements.)

Details of Savings and Equity

Do you or your partner have any Bank or Building Society accounts, savings, shares, or investments in the UK or abroad?

Yes

No

If **YES** you **MUST** give details of Bank/Building Society name etc.

Amount

What? Savings, Shares, Investments.

£

£

£

Where you lived before

Applicant. Please list all your previous addresses over the last 10 years

Address	No. of bedrooms	Date from	Date to	Did you lodge, rent or own?	Landlord details if rented	Why did you leave?

(continue on a separate sheet if necessary)

Joint applicant. Please list all your previous addresses over the last 10 years

Address	No. of bedrooms	Date from	Date to	Did you lodge, rent or own?	Landlord details if rented	Why did you leave?

(continue on a separate sheet if necessary)

Why do you want to move?

Please answer the questions that are most appropriate to your circumstances.

Do you need to move to a different location?

Yes No If No go to next question.

To be closer to a relative who needs my support because of their age, disability or illness?

Yes No

To be closer to a relative who provides support to me because of my age, illness or disability?

Yes No

Desire for a change of location?

Yes No

Describe why you need to move

Please continue on a separate sheet if needed.

Please enter the name(s) and address(es) of the person(s) you give or receive support from:

Name 1

Address

Telephone Relationship to you

Name 2

Address

Telephone Relationship to you

Why do you want to move?

Do you need to move due to medical reasons Yes No If No go to next question.

Name	Disability or condition	How is this condition affected by your current housing?	How would alternative housing help your condition?

Has it become impossible for you (or a member of your household) to remain in your current accommodation due to your/ their medical condition or disability Yes No

If Yes - Please describe why.

Which of these best describes your current situation? (Please tick one box)

- I can not be discharged from hospital as my home is no longer suitable for me
- I can not access my home as I require level entry or wheelchair access
- My home has been assessed as unsuitable for adaptations
- I have difficulty accessing crucial parts of my home
- It is impossible for me to access crucial parts of my home
- My medical condition or disability is worsened by my current home
- I can no longer physically manage the stairs to my home
- Other

Mobility

Do you or anyone in your household

If so who?

- Use a wheelchair indoors and outdoors all the time
- Cannot manage steps, stairs or steep gradients and may require a wheelchair for outdoor mobility.
- Have restricted mobility, can only manage one or two steps or stairs
- No mobility problems

Do you live in a property that has major property defects? Yes No If No go to next question.

You live in private accommodation and your landlord has been served an 'Unresolvable Category 1 Hazard' notification under the Housing Act 2004. Yes No

You have to leave your accommodation due to Environmental Health notification of Statutory Overcrowding. Yes No

Your landlord has informed you that your property requires extensive repairs or is in a regeneration scheme. Yes No

Your accommodation is subject to a demolition order. Yes No

Please provide supporting evidence with your application.

Are you at significant risk of violence or harassment?

Yes No If No go to next question.

Select the most appropriate statement. Only those applicants that have been assessed as at significant risk in their current home will be considered for high priority.

I can no longer remain in my home due to violence at home (domestic violence). Yes No

I have to leave my home as I am suffering from harassment, threats or violence from a person not living with me. Yes No

Another reason Yes No

Give details

Information will need to be provided from the relevant statutory agency in support of your application, for example a statement from the Police.

Is your home overcrowded?

Yes No If No go to next question.

If you have selected yes which statement describes your situation.

We are a cohabiting couple and share a bedsit (have no separate bedroom). Yes No

There are adults over the age of 18 that are not a couple and are not siblings sharing a bedroom. Yes No

You have children of the opposite sex sharing a bedroom where at least one child is aged over 7 years. Yes No

You have 2 children of the same sex sharing a bedroom, one of which is aged 10 years or older; and there is an age gap of 5 years or more. Yes No

Describe your overcrowding situation.

This information will be checked against the information you have provided in this application, for example, size of property and number of applicants moving with you.

Do you want to move to a smaller property?

Only applicants that are currently residing in High Peak Community Housing, Dales Housing, Amber Valley Housing Limited, Three Valleys Housing accommodation or any other participating Housing Association landlord (please check with your landlord) will be considered. Home-Options will automatically calculate a band based on your current accommodation. Yes No If No go to next question.

I am willing to move to a 1 bedroom home or give up 2 bedrooms. Yes No

I am willing to move to a smaller property giving up 1 bedroom. Yes No

Why do you want to move?

Does your home have adaptations that you no longer require?

Yes No If No go to next question.

Describe why you need to move

Do you have to leave your home due to fire or flood?

Yes No If No go to next question.

If **YES** what damage has been caused to your home?

If **YES** describe which rooms have been affected?

If **YES** what date was your home damaged?

Are you homeless or will be within 28 days? Yes No If No go to next question.

If **YES** please describe why you are homeless or threatened with homelessness.

Your homelessness may be preventable. You should contact your nearest Housing Office at the earliest opportunity.

Are you in specialist or supported accommodation and ready to move into independent living? Yes No If No go to next question.

Applicants will be accepted following referral from the accommodation provider or support provider following a satisfactory term of independent living. The referral should also include a move-on package of support. Please provide details of your specialist or supported accommodation provider.

Accommodation/Support Provider	Contact Name	Contact Telephone Number

Are you over 55 (over 60 if applying for a property from Amber Valley Housing Limited or Three Valleys Housing) and would you like to move to sheltered accommodation.

Yes No If No go to next question.

Sheltered Accommodation may be a bungalow or flat where there is a support service provided. There is an additional charge for this support, which is separate from the rent. You may have to make a contribution to this charge. If so, we will advise you at the appropriate time.

Additional Questions

Do you or anyone in your household

Have a significant mental illness? Have a learning disability? Have a drug or alcohol problem?

Are you, or is anyone in your household, currently or have been previously in

Local Authority Care? In prison?

Are you currently being supported by anyone?

This should include GP, Social Worker, Probation Officer, Drugs Worker etc.

Accommodation/Support Provider	Contact Name	Contact Telephone Number

Have you been evicted?

Have you been evicted by a Local Authority, Housing Association or private landlord for rent arrears, anti-social behaviour or other breaches of tenancy agreement within the last five years?

Yes No

If yes please give details

Are you currently experiencing debt problems? Yes No

It is important not to panic about debt problems but also you shouldn't ignore them - they won't go away.

If you are worried about how to deal with your debts, there is free, confidential advice available.

By providing Home-Options with details of your debts we can offer you advice on how to deal with debt as well as offer advice on housing options and any impact debt may have on your future housing.

Lender (name)	Amount	What? (store card, Council Tax)
	£	
	£	
	£	
	£	
	£	
	£	

Any other information you would like to tell us about?

Rural Local Connection

Do you or your partner (if applicable) have a connection with any rural Parish or Village in High Peak, Derbyshire Dales, Amber Valley or Erewash?

Some properties are advertised on Home-Options with strict Local Connection criteria and therefore you will need to show that you are eligible. If you wish to live in a Rural Parish or Village you may be asked to provide evidence of your connection. Connection reasons are:

- 1 You and/or your partner currently live in the Parish or Village.
- 2 You and/or your partner have immediate family (parents, brother, or sister, adult children) who currently live in the Parish or Village.
- 3 You and/or your partner have immediate family (parents, brother, or sister, adult children) who don't live in the Parish or Village but have previously.
- 4 You and/or your partner don't live in the Parish or Village now but you have previously.
- 5 You and/or your partner have had and continue to have permanent full time employment in the Parish or Village.

Rural Parishes or Villages may include all Parishes and Villages in the High Peak, Erewash, Derbyshire Dales and those in the Amber Valley that adjoin the Derbyshire Dales. Generally the definition of rural is a settlement in the countryside with less than a 3000 population.

In the table below list the name of the Parish or Village, circle one connection reason number (connection reasons are listed above) then provide the date from and to when the connection was established.

You/Partner (delete as appropriate) Parish:									
Connection reason	1	2	3	4	5	Date From		Date To	

You/Partner (delete as appropriate) Parish:									
Connection reason	1	2	3	4	5	Date From		Date To	

You/Partner (delete as appropriate) Parish:									
Connection reason	1	2	3	4	5	Date From		Date To	

Convictions and cautions

Please give details below of any criminal convictions you, or any person included in your application, have had (other than convictions that are spent under the Rehabilitation of Offenders Act 1974).

Name of the person in the application	Date of conviction	Reason for conviction?	Sentence received

Continue on a separate sheet if necessary.

Vulnerable Applicant Assessment

For the purposes of Home-Options a vulnerable applicant is any person aged 16 or over, who is receiving support, or may be, in need of support services because they have a health or other disabilities related to age or illness. They are people who may need additional services to be able to engage with the Home-Options process or require future services to enable them to sustain a tenancy. They are people who may not be able to take care of themselves or protect themselves from harm or exploitation.

Please tick all that apply to you.

Tick

- | | |
|--|--------------------------|
| I have a permanent physical disability | <input type="checkbox"/> |
| I am in receipt of High Rate Disability Living Allowance or Attendance Allowance | <input type="checkbox"/> |
| I have a learning disability | <input type="checkbox"/> |
| I have a visual impairment | <input type="checkbox"/> |
| I have a hearing impairment | <input type="checkbox"/> |
| I am a young person leaving care and require help in finding a home | <input type="checkbox"/> |
| I am an ex offender and require help in finding a home | <input type="checkbox"/> |
| I have an issue with alcohol and require help finding a home | <input type="checkbox"/> |
| I have an issue with drugs and require help finding a home | <input type="checkbox"/> |
| I have a mental health problem | <input type="checkbox"/> |
| I am over 60 and require help in finding a home | <input type="checkbox"/> |
| I am experiencing domestic abuse | <input type="checkbox"/> |
| I am experiencing anti-social behaviour/harassment | <input type="checkbox"/> |
| I am Isolated and have no support | <input type="checkbox"/> |
| I have a problem with reading and writing | <input type="checkbox"/> |
| English is my second language and my first language is (state language) | <input type="checkbox"/> |
| I may need help with bidding and have no-one to help me | <input type="checkbox"/> |
| I am experiencing difficulties with debt and need help | <input type="checkbox"/> |

If you have ticked any of the above your details may be passed to other agencies to assist you in gaining and or sustaining accommodation.

Alternative Housing Options

Affordable Home Ownership

Anyone who cannot afford to buy a suitable home on the open market can apply for HomeBuy which is the scheme formally known as Shared Ownership.

It is:

- A part-buy, part-rent scheme
- A way to buy what you can afford now so you don't overstretch yourself financially

You will need to be able to secure a mortgage against part of the property of at least 25%.

Home-Options will advertise properties for sale through this scheme. Would you be interested to receive information on properties for sale and re-sale?

- Yes No

Alternative Housing Options

Private Rented Accommodation

Private rented accommodation can include lodgings, renting your own flat or house or shared accommodation. Your landlord will be a private individual or company. It offers you the freedom to find the type of accommodation you require in the area you wish to live. Often landlords will require a deposit and rent in advance. Most Home-Options partners have a rent deposit scheme that you may be eligible to receive.

Home-Options are working with landlords to improve standards and are accrediting landlords who wish

to attain a good standard of accommodation. These properties will be advertised through Home-Options.

If you would be interested in receiving information on any of the following please tick the appropriate box.

- Private rented properties
 Accredited Landlords
 Rent Deposit

Mutual Exchange

If you are a secure tenant or assured tenant of a registered Housing Association or local housing authority you can exchange or 'swap' your property with another tenant. This is called a Mutual Exchange. Any Mutual Exchange is subject to set conditions and can only happen with both landlords' written consent.

If you are an existing tenant of High Peak Community Housing, Dales Housing, Amber Valley Housing Limited or Three Valleys Housing you can apply for an exchange of property using Home-Options.

Home-Options operate a Website where tenants wishing to exchange can advertise their properties and search for properties they wish to exchange with, you can find us at www.Home-Options.org and click on the Mutual Exchange Tab. Conditions can be obtained from any Home-Options Office.

Are you a tenant of a Housing Association or Council?

Would you like to register for Mutual Exchange?

- Yes No

Declaration

Are you related to any Director, Member or employee of Amber Valley Borough Council, Amber Valley Housing, Derbyshire Dales District Council, Dales Housing, Erewash Borough Council, High Peak Borough Council, High Peak Community Housing or Three Valleys Housing? If yes please give details.

I/we declare that the information given on this application is correct. I/we understand that it is an offence knowingly or recklessly to make a statement which is false, or to withhold information. I/we also understand that I/we may be liable for prosecution if any information is subsequently found to have been false or withheld. If prosecuted by a Home-Options partner and found guilty, I/we could be ordered to pay a fine of £5,000.

I/we will advise Home-Options of any changes in circumstances which occur whilst my/our application is registered.

By completing this form I/we give consent for Home-Options to follow up details and apply for references and information for the purposes of assessing my/our needs and eligibility for rehousing.

Applicant Signature

Date

Joint Applicant/Partner Signature

Date

Information to Process Your Application

The following information is required before your application can be placed on the Home-Options Housing Register. We require COPIES please DO NOT send original documents.

Identity	Residence	Children	Qualification
Photo Identification Birth Certificate Immigration papers	Electoral registry entry Rent book/card Recent bill Tenancy agreement	Child benefit book Residence Order Birth certificate	Passport National ID Papers Workers Registration