



CHANGE OF CIRCUMSTANCES

PLEASE NOTE, IF YOU DO NOT RETURN THIS FORM BY _____
YOUR APPLICATION WILL BE CANCELLED.

Application reference number:		Application date:	
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Name of applicant 1	
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Name of applicant 2	
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Your current address	
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Postcode	
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Type of change:

- Contact details – please complete section 1
- Address – please complete section 2 and 3 (**please provide proof of new address**)
- Change of people who live with you – please complete section 3
- Adding additional people to your application – please complete section 3, 4 and 5
- Other – please complete section 6

Please ensure you have signed below as we are unable to process this form without your signature.

Signed: (Applicant 1)..... Date

Signed: (Applicant 2)..... Date

Office use only - Updated by:.....Date.....

CONTACT US

By phone <ul style="list-style-type: none">• Head Office 01909 534484• Area Office West 01909 533426• Area Office East 01777 713202	On-line <p>Visit our website www.a1housing.co.uk You can also email us at: customer.services@a1housing.co.uk</p>
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SECTION 1

Change of contact details

Change of Name	
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Please note for change of name we will need to see your marriage certificate, deed poll documentation etc

Home telephone number	
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Mobile telephone number	
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Email address	
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Correspondence address	
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Postcode	
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Is there anybody we can contact on your behalf?

No

Yes

Name of contact	
-----------------	--

Relationship to you	
---------------------	--

Address of contact	
--------------------	--

Postcode	
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Telephone number	
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Do they have permission to discuss your housing application on your behalf?

No

Yes

Have the details of your support worker/social worker changed?

Name of support worker	
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Telephone number	
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Name of organisation	
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SECTION 2

Change of address

Your NEW address	
Postcode	
Date when you moved	

Your PREVIOUS address	
Postcode	
Date when you moved	

Reason for moving

What type of property are you living in? (please tick)

House	<input type="checkbox"/>	Flat	<input type="checkbox"/>	Bed and breakfast	<input type="checkbox"/>
Bungalow	<input type="checkbox"/>	Maisonette	<input type="checkbox"/>	Hostel	<input type="checkbox"/>
Caravan	<input type="checkbox"/>	Other: (please state)			<input type="checkbox"/>

How many bedrooms does the property have?	
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If your home is a flat/maisonette please state which floor it is on	
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What is the tenure of your current home? (please tick)

Council tenant	<input type="checkbox"/>	Housing association tenant	<input type="checkbox"/>	Owner occupier	<input type="checkbox"/>
Private shorthold tenant	<input type="checkbox"/>	Other private tenant	<input type="checkbox"/>	Tied to employment	<input type="checkbox"/>
Staying with friends/relatives	<input type="checkbox"/>	Forces accommodation	<input type="checkbox"/>	Lodgings/B&B	<input type="checkbox"/>
Other (Please state).....					<input type="checkbox"/>

If you are a tenant (please complete the below)

Name of Landlord	
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Address	
Postcode	

Please continue on to next page.....

CONTINUATION OF SECTION 2

Do you have the following amenities? (please tick)

Amenities			Are they shared with anyone not moving with you?	
Hot Water Supply	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inside WC	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cooking facilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

SECTION 3

Change of address / people who you live with

People on your application who **NO** longer live with you (that you included when you last contacted us):

Name	D.O.B	Relationship to applicant	Reason for no longer living with them

People who you **NOW** live with or wish to add to your application:

Name	D.O.B	Relationship to applicant	Do you currently live with this person?		Does this person require re-housing with you?	
			<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you are adding a person over the age of 18, who will be re-housed with you, please complete section 4 and 5.

If you are adding a child we will need the following evidence, birth certificate, joint custody or joint residency order.

SECTION 4

Adding a person over the age of 18

Previous addresses for the last 5 years (for the person who is being added to the application)

Name of person being added to the application	
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Address		
Postcode		
Date from and Date to		
If Council/Housing Association was this their tenancy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name and address of Landlord		
Reason for leaving		

Address		
Postcode		
Date from and Date to		
If Council/Housing Association was this their tenancy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name and address of Landlord		
Reason for leaving		

Address		
Postcode		
Date from and Date to		
If Council/Housing Association was this their tenancy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Name and address of Landlord	
Reason for leaving	

SECTION 5

Declaration and authority to access information

I declare that the details given in this form are correct. I understand that if a tenancy is allocated on the basis of a false statement this may result in A1 Housing regaining possession of the property.

I hereby give my explicit consent to:

- The Police, Social Services, Probation Service, other Local Authorities, Housing Associations and other appropriate agencies or persons who may process that data and provide more detailed personal data about me.
- Bassetlaw District Council and A1 Housing disclosing the information on this form to the Police, Social Services, Probation Service, other Local Authorities, Housing Associations and other appropriate agencies or persons who may process that data and provide more detailed personal data about me.
- Bassetlaw District Council's Housing Benefit Unit disclosing information to A1 Housing once I am a tenant with regard to any future Housing Benefit claims I may make.

I understand that this personal data processed, obtained and given may be used so that my application can be properly investigated and assessed.

All details provided are strictly confidential. The Data Protection Act and the Access to Personal Files (Housing Regulations) 1989 give you the right to look at information.

The personal information you have supplied on this form will be used for your application for re-housing and may be shared with other areas of A1 Housing, Bassetlaw District Council, the Police and other public bodies for the recovery of debt, prevention or detection of fraud or the detection or prevention of crime as permitted under the Data Protection Act 1998. We advise applicants that the data held by the authority in respect of your housing application will be used for cross-system and cross-authority comparison purposes for the prevention and detection of fraud.

Name : (The person being added to the application).....

Signed:

Date

SECTION 6

Other

Please use the below section to inform us of any other changes to your application. For example, pregnancy, eviction etc.

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For office use only

Date	
Information	
Initials	
Exclusion List	
PVP Check	
Eligibility	
Council Tax Register	
Write Offs	
Rents - Current/FTA	
Sundry Debts/Recharges	
Other Authorities	
Registration Card Issued	<input type="checkbox"/> Yes