

Application form for shared ownership/ purchase

(Tick boxes applicable)

1. About your new home

Name of the court you are applying for:

Plot numbers you are interested in (new build only):

First choice Second choice Third choice

What type of property are you interested in:

Apartment Bungalow

How many bedrooms would you prefer:

One-bedroom Two-bedroom

Would you prefer:

Ground floor Upper floor No preference

Are you interested in:

Outright purchase Shared ownership

Would you be interested in other properties in the same (tick any relevant):

Town District County

Percentage you wish to purchase:

We offer Retirement Living and Extra Care options. In Retirement Living, you live independently in your own home with support from an on-site manager. In Extra Care, you live in independently in your own home with support from an on-site manager and optional support from an on-site Care Team.

Would you prefer:

Retirement Living Extra Care

2. About you

Applicant 1

Title: Surname:

First name:

Middle name:

Phone no(s):

Email:

Date of birth: NI Number:

Applicant 2

Title: Surname:

First name:

Middle name:

Phone no(s):

Email:

Date of birth: NI Number:

Present address:

Contact details (if not applicant):

Relationship to applicant 1:

Which local authority do you currently live in:

If working, which local authority do you currently work in:

3. Power of Attorney

Do you have person(s) acting on your behalf as Power of Attorney? Yes No

If so please give details and contact number.

A copy of the Power of Attorney needs to be attached to this application.

Name:	<input type="text"/>
Address:	<input type="text"/>
Phone No(s):	<input type="text"/>
Email:	<input type="text"/>

4. Employment

Are you currently employed?

Permanent Contracted Contract end date if applicable:

Occupation (title/ grade):

When did you start working for your current employer?

Employer's name:	<input type="text"/>
Address:	<input type="text"/>
Phone no(s):	<input type="text"/>
Email:	<input type="text"/>

Unemployed Retired

Do you receive an Armed Forces pension Yes No

Are you a surviving partner of a regular service personnel who died in service within the last two years? Yes No

Are you a key worker? Yes No

Please state which: Education, Fire Service, Health, Local Authority, Police, Prison Service, Probation Service, MOD (RAF, Army, Navy, Royal Marines) and rank. Including employee type, Regular service, Clinical staff, MOD Police, Ex Regular personnel, Uniformed staff in Defence Fire Service:

Other:

5. Personal information

Have you ever had a home repossessed? Yes No

Have you ever been declared bankrupt or entered into an Individual Voluntary Agreement ?

Yes No

If yes, has it been discharged? Yes No

Have you ever had any CCJs? Yes No

If yes have they been satisfied? Yes No

Have you ever had rent arrears? Yes No

If yes, please give details:

6. Your present housing

Council or housing association tenant

Current home owner

Are you living in a property that comes with your job?

Are you living with friends or family?

First time buyer

Renting privately

On a council waiting list

Other:

What type of property do you live in?

Terraced house

Detached house

Semi detached house

Flat

Bungalow

No. of bedrooms

Other:

Please tick any of the following problems that affect your home severely

- | | |
|--|--|
| <input type="checkbox"/> Leaking roof or walls | <input type="checkbox"/> Faulty/ old electrical wiring |
| <input type="checkbox"/> Rotting wood e.g. windows, floors | <input type="checkbox"/> Lack of heating facilities |
| <input type="checkbox"/> Rising damp | |

Other:

Are you in the process of selling your property? Yes No

7. Other property

Do you, or anyone else intending on living in a Housing 21 development with you, own any other property in the UK or abroad? Yes No

8. Pets

Do you intend bringing your pet(s) with you? (See Note 4) Yes No

Type of pet(s):

9. Reasons for applying

Please tick the box or boxes which best describe your reasons for applying (See Note 1)

- | | |
|--|--|
| <input type="checkbox"/> Need a smaller property/easier to manage | <input type="checkbox"/> Any type of harassment |
| <input type="checkbox"/> Planning for the future | <input type="checkbox"/> Safety and security |
| <input type="checkbox"/> Relationship breakdown | <input type="checkbox"/> Tenancy has ended/due to end |
| <input type="checkbox"/> Maintenance and upkeep of existing property | <input type="checkbox"/> Homeless or at risk of being homeless |
| <input type="checkbox"/> Broaden social horizons | <input type="checkbox"/> For health reasons |
| <input type="checkbox"/> Need a retirement property | <input type="checkbox"/> Domestic violence |
| <input type="checkbox"/> Relocation | <input type="checkbox"/> Accessibility |
| <input type="checkbox"/> Move closer to family | |
| <input type="checkbox"/> Sold my property | |
| <input type="checkbox"/> Affordability of other retirement housing | |

Other reasons (including any disputes with neighbours):

10. Special considerations

Does either applicant have any physical disabilities or other health considerations which make it difficult for you to manage in your present home? (Use additional sheet if necessary). (See Note 2)

Applicant 1

Mobility problems:

Other frailty/ health problems:

Care packages presently received:

How many care calls a day do you currently receive?

Applicant 2

Mobility problems:

Other frailty/ health problems:

Care packages presently received:

How many care calls a day do you currently receive?

Do you have any relatives living within the local authority area of choice?
If so, please give details (See Note 3)

11. Buying your property

If you do not own your present property, how will you finance the purchase of a property from Housing 21? You will need to provide evidence at the time of reservation (new sales only).

Savings Bank or building society mortgage Family support

Others – please state:

If a property is offered, would there be any reason for delay in purchase?

Please note that your home is at risk if you do not keep up repayments on a mortgage or other loan secured on it. Continual non payments of rent will also place your home at risk.

12. Income, pensions and benefits

Please provide details of your individual income. This needs to be as accurate as possible (to the nearest penny). Can you please state the source of income e.g. state pension, Armed Forces pension, private pension, attendance allowance or any other benefits, and the frequency received e.g. weekly, 4 weekly, monthly.

Applicant 1		
Source of income*	Amount £	Frequency**
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____

Applicant 2		
Source of income*	Amount £	Frequency**
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____
_____	£ _____	_____

*State pension / private pension / type of benefit **Weekly, 4 weekly, monthly

If you own your own home, how much would it sell for: £ _____

How much do you owe on your mortgage? £ _____

What is the total amount of savings you and any joint applicant have in either a bank, building society or investments?

Do not include the value of your existing property.

Is your property on the market? Yes No

If yes, what is the name of the Estate Agent _____

Please note, if you have a property to sell it must be sold prior to completion of your new home.

Savings - **Total amount of savings: £** _____

Investment income (Annual) £ _____

You will need funds to pay for fees and moving costs when buying a new home. If you have a property that you own, you will need access to at least £10,000 to cover the cost of Estate Agents fees, moving and legal fees. If you do not own your own property, you will need access to at least £5,000 to cover the cost of moving and legal fees. Can you confirm that you have the sufficient funds to cover this?

Yes No

Do you have any outstanding loans? Yes No

If yes, what is the outstanding payment: _____

Do you have any outstanding credit cards? Yes No

If yes, what is the outstanding balance: _____

Are you receiving benefits? Yes No

If yes, what is the monthly payment:

- | | |
|--|--|
| <input type="checkbox"/> Working tax credit | <input type="checkbox"/> Disability living allowance |
| <input type="checkbox"/> Guaranteed maintenance Income | <input type="checkbox"/> Housing benefit |
| <input type="checkbox"/> Attendance allowance | <input type="checkbox"/> Council tax benefit |

Other: _____

Do you need help or advice on claiming benefit? Yes No

13. Shared equity/ ownership leases

Where the purchase involves a shared equity/ownership, the purchaser should be aware that they are purchasing an interest in the property that is less than 100%.

An affordable proportional monthly rent will be charged on the outstanding share, less than the maximum percentage that can be purchased.

14. Your solicitor (if known)

Company name:	
Address:	
Phone no:	
Contact name:	

15. Equal opportunities

We monitor these categories to ensure that everyone who applies for accommodation is treated equally and fairly and that our policies and procedures comply with legislation. If you do not want to answer these questions, it will not affect your application and will not be used for selection purposes.

Applicant 1

Do you have a disability?

- Yes No Prefer not to say

What is your sex? (Please use the sex recorded on your birth or gender recognition certificate. A question about gender identity follows).

- Male Female

Is the gender you identify with the same as your sex registered at birth?

- Yes No. Please enter gender identity:
- Prefer not to say

What is your sexual orientation?

- Heterosexual Gay Lesbian Bisexual
- Pansexual Other Prefer not to say

What is your religion?

- | | | |
|------------------------------------|---------------------------------|---|
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> No religion |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Other <input type="text"/> |

How would you describe your ethnic group?

White

- | |
|--|
| <input type="checkbox"/> English, Welsh, Scottish, Northern Irish or British Irish |
| <input type="checkbox"/> Gypsy or Irish Traveller |
| <input type="checkbox"/> Roma |
| <input type="checkbox"/> Other <input type="text"/> |

Asian or Asian British

- | |
|---|
| <input type="checkbox"/> Indian |
| <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Other <input type="text"/> |

Mixed or Multiple Groups

- | |
|---|
| <input type="checkbox"/> White and Black Caribbean |
| <input type="checkbox"/> White and Black African |
| <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Other <input type="text"/> |

Black, Black British, Caribbean, or African

- | |
|--|
| <input type="checkbox"/> Caribbean |
| <input type="checkbox"/> African background (please state below) |
| <input type="checkbox"/> Other <input type="text"/> |

Other ethnic group

- | | |
|--|--|
| <input type="checkbox"/> Arab | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Any other ethnic group <input type="text"/> | |

Applicant 2

Do you have a disability?

- | | | |
|------------------------------|-----------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Prefer not to say |
|------------------------------|-----------------------------|--|

What is your sex? (Please use the sex recorded on your birth or gender recognition certificate. A question about gender identity follows).

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
|-------------------------------|---------------------------------|

Is the gender you identify with the same as your sex registered at birth?

- | | |
|--|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No. Please enter gender identity: <input type="text"/> |
| <input type="checkbox"/> Prefer not to say | |

What is your sexual orientation?

- | | | | |
|---------------------------------------|--------------------------------|--|-----------------------------------|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Gay | <input type="checkbox"/> Lesbian | <input type="checkbox"/> Bisexual |
| <input type="checkbox"/> Pansexual | <input type="checkbox"/> Other | <input type="checkbox"/> Prefer not to say | |

What is your religion?

- | | | |
|------------------------------------|---------------------------------|---|
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> No religion |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Other <input type="text"/> |

How would you describe your ethnic group?

White

- | |
|---|
| <input type="checkbox"/> English, Welsh, Scottish,
Northern Irish or British Irish |
| <input type="checkbox"/> Gypsy or Irish Traveller |
| <input type="checkbox"/> Roma |
| <input type="checkbox"/> Other <input type="text"/> |

Asian or Asian British

- | |
|---|
| <input type="checkbox"/> Indian |
| <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Other <input type="text"/> |

Mixed or Multiple Groups

- | |
|---|
| <input type="checkbox"/> White and Black Caribbean |
| <input type="checkbox"/> White and Black African |
| <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Other <input type="text"/> |

Black, Black British, Caribbean, or African

- | |
|--|
| <input type="checkbox"/> Caribbean |
| <input type="checkbox"/> African background (please state below) |
| <input type="checkbox"/> Other <input type="text"/> |

Other ethnic group

- | | |
|--|--|
| <input type="checkbox"/> Arab | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Any other ethnic group <input type="text"/> | |

16. How did you find out about us

How did you find out about Housing 21 or the court?

- | | | |
|--|---|---|
| <input type="checkbox"/> Local knowledge | <input type="checkbox"/> Local estate agent | <input type="checkbox"/> Poster/ leaflet within the |
| <input type="checkbox"/> Friends/relatives | <input type="checkbox"/> Local authority | <input type="checkbox"/> community |
| <input type="checkbox"/> Sign board | <input type="checkbox"/> Rightmove | <input type="checkbox"/> Elderly accommodation |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Mailing | <input type="checkbox"/> council website |
| <input type="checkbox"/> Website | <input type="checkbox"/> Digital advert | |

Other:

17. Statement

I/We understand that the completion of this form does not guarantee the offer of a property, nor does it commit me/us to the purchase of a property.

I/We hereby declare that the information that I/ we have provided in the form accurately reflects my/our current circumstances. The Association is prevented by law from granting a benefit to **Board or committee members, members and staff of the Association or their close relatives except under certain limited circumstances.**

If you are related to any member or officer of the Association please provide details:

Signature(s) Date:

Applicant 1:

Applicant 2:

Note 1 (Section 6) – Information regarding your current housing allows us to assess your need for specialist retirement housing, i.e. level access.

Note 2 (Section 10) – An overview of your current medical condition and any care received will help us assess your need for specialist housing, suitability for the property being applied for and whether Housing 21 or the external care provider are able to meet your medical needs.

Note 3 (Section 2) – Allocation of a new sale and some re-sales require the applicant to already live in or have immediate family currently living within the Local Authority area.

Note 4 (Section 8) – Information is required about any potential pets you may wish to bring so we can discuss their suitability for the new property and advise you of the current Pet Policy.

18. Privacy Policy

The information supplied on this application form will be used to process your application for shared ownership/ leasehold purchase with Housing 21 and to correspond with you.

We recognise that your personal information may include sensitive personal data, and we will process your personal data in line with the UK General Data Protection Regulation 2018 and the Data Protection Act 2018. Our full Privacy Notice can be accessed on the Housing 21 website: www.housing21.org.uk/corporate/privacy.

We may need to share some of your personal information with organisations which handle public funds or approved third parties associated with your purchase/ rental for verification of details and/ or to prevent and detect fraud and/or crime.

We are routinely required to provide applicants' personal data to:

- Independent Financial Advisors to conduct affordability assessments
- Solicitors in relation to a sale
- Homes England (an executive non-departmental public body, sponsored by the Ministry of Housing, Communities and Local Government) for audit purposes

Your personal information may also be used to conduct anonymous satisfaction surveys and disclosed securely to government departments, research organisations or agencies working for Housing 21 and/ or independently.

It is important to note that personal information collected on this form will only be shared with approved third parties where there is a legal obligation, or we have your written consent

Further, we may need to conduct Anti-Money Laundering (AML) checks as part of the due diligence process which is necessary to help identify and protect against the risk of money laundering. We are not obligated to inform applicants if an AML check is being undertaken.

We will securely dispose of information that is no longer needed for the purposes of processing your application. For new sales we shall contact you when all sales have concluded to ask if you wish to remain on the resale waiting list, or for your details to be deleted.

I/ We consent to Housing 21 sharing the information on this application form, with the named third parties, for the purpose specified above: **Applicant 1** **Applicant 2**

We may seek references from the named individuals provided by you, to support your application.

I/ We consent to Housing 21 sharing the information on this application form, with named third parties, for the purpose specified above: **Applicant 1** **Applicant 2**

Where information you supply is of a sensitive nature, such as medical details or information concerning your personal circumstances, it is necessary to give explicit consent for us to be able to process the data. Please indicate your consent by ticking the following box.

I/ We consent to Housing 21 processing the information on this application form for the purpose specified above: **Applicant 1** **Applicant 2**

I/ We consent to Housing 21 processing my/our information, contained in this application form, for the intended purpose specified above: **Applicant 1** **Applicant 2**

If at any stage you notice your data is incorrect and want it rectified, if you want it deleted, or if you wish to withdraw your consent to us using or sharing your data please contact our Data Protection Officer at dataprotection@housing21.org.uk or write to **Housing 21, Tricorn House, 10th Floor, 51–53 Hagley Road, Birmingham B16 8TP.**

You have the right to complain about any matter relating to our services, including how we use your personal data. In the first instance please contact our Strategic Operations Team on **0303 192 1622** or email: feedback@housing21.org.uk.

If you remain dissatisfied with how your complaint has been handled, or how your personal data has been processed, you can also write to the UK Information Commissioner’s Office (ICO) at: www.ico.org.uk. Our ICO registration number is Z5515259. You can find our full Privacy Notice on our website at: www.housing21.org.uk.

Signature(s) Date:

Applicant 1:

Applicant 2:

Additional information

Please return to:

The Property Sales Team, Housing 21,
10th Floor, Tricorn House, 51–53 Hagley Road,
Birmingham B16 8TP



Tricorn House,
51-53 Hagley Road,
Birmingham B16 8TP

0370 192 4000

[housing21.org.uk](https://www.housing21.org.uk)

Housing 21 is a leading, not for profit provider of Retirement Living and Extra Care for older people of modest means.

Regulated by the Social Housing Regulator Reg. No. L0055
Community Benefit Society FCA Reg. No. 16791R