

Mount Green Housing Association

Application for Independent Living Accommodation



Mount Green is a small housing association with properties located across Surrey and the neighbouring areas. Most of the housing stock is allocated through the local authorities and provides housing for individuals and families that are on the local housing register.

However, in addition to local authority nominations we hold an internal waiting list for Independent Living accommodation, subject to applicants meeting and evidencing that they meet the specific criteria.

Part A: Type of application.

Please indicate which criteria you meet – if you need any assistance with your application please contact our Independent Living team on 01372 379 555 who will be more than happy to discuss your eligibility and housing options.

Type of Accommodation	Criteria	Please tick all boxes which apply
Independent Living	Over the age of 55, Housing Related Support service provided based on your needs and a community alarm system	<input type="checkbox"/>

Part B: Current Housing Information

Are you a current tenant of Mount Green Housing Association? YES NO

If YES please go to section C.

If NO please complete the following details regarding your current accommodation.

What is your current housing? <i>E.g. private owner, living with family, private rented, housing association or local authority.</i>	
If you are a tenant we may wish to contact your landlord to request a reference, are you happy for us to do so?	YES <input type="checkbox"/> NO <input type="checkbox"/> If YES, please provide contact details:
What type of property do you currently live in? <i>i.e. 1 bedroom flat / 3 bedroom house</i>	

Mount Green Housing Association

Application for Independent Living Accommodation

PART C: Personal Information

If you are applying for a joint tenancy please complete the second applicant details in the second column entitled 'Second Applicant'.

	First Applicant	Second Applicant
Title (Mr/ Mrs/ Ms/ Miss)		
First Name		
Surname		
Current Address		
Postcode		
Date of Birth		
Home Telephone		
Work Telephone		
Mobile Telephone		
Email address		
National Insurance No.		
Do you hold a British passport?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Do you have indefinite leave to remain in the UK?	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

You will need to provide copies or evidence of your passport, national insurance number and other identification to submit with this application.

Please list all other persons to be included in the application.

If you are invited to a viewing you will be asked to provide identification of all applicants.

Name	Date of Birth	Relationship to applicant

Additional Details: This will allow us to assess what type of housing you may require and ensure you are only offered appropriate accommodation.

Mount Green Housing Association

Application for Independent Living Accommodation

		If YES please provide details
Do you or any of your household have any pets?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you or any of your household require a ground floor or lift accessible property?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you or any of your household have a disability?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you or any of your household require the use of a wheelchair?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Are you or any of your household registered disabled? <i>You will be asked to provide evidence of this at any viewing</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>	
If YES, does this affect your housing allocation?		
What is the reason for your request for housing?		

PART D: Medical needs/ other needs to support your housing application

		If YES please provide details
Is any member of the household a registered blind person?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you have a social worker/C.P.N or care manager	YES <input type="checkbox"/> NO <input type="checkbox"/>	
May we contact your Doctor/ C.P.N / social worker for any further information if this is required?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you or any member of your household use or receive any of the services listed?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Personal Care	YES <input type="checkbox"/> NO <input type="checkbox"/>	

Mount Green Housing Association

Application for Independent Living Accommodation

District Nurse	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Meals on Wheels	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Day Centre	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Please provide any additional details that may help to support your housing application:

First Applicant

Second Applicant

Mount Green Housing Association

Application for Independent Living Accommodation

PART E: Where do you wish to live?

Please tick all that apply. X Indicates this type of accommodation is not available.

Local Authorities	Scheme	Studio	1 Bedroom	2 Bedroom	Bungalow
Epsom and Ewell	Bartlett House Worcester Park				X
	Mathias House Epsom	X		X	X
Mole Valley	St Johns Close Leatherhead	X			X
	Graham House Bookham				X
Reigate and Banstead	Beecholme Banstead	X		X	X
	Highwood Reigate	X			X
Waverley	Church Close Milford			X	X
	Greylees Godalming	X		X	X
Woking	Downside Orchard Woking				
Horsham	Hawkridge Rudgwick Do you have a local connection? Yes/No				X

Please list your preferred Independent Living Scheme or Local Authorities in specific order of preference – please indicate any factors that should be considered in these areas.

	Local authority or Independent Living Scheme	Reason/local connection
e.g.	<i>Mole Valley</i>	<i>near to friends and family</i>
1.		
2.		
3.		
4.		

Mount Green Housing Association

Application for Independent Living Accommodation

PART F: Your Income

	First Applicant	Second Applicant
Main type of Income – please indicate e.g. pension, benefits / wages		
Other income – please specify		
Are you currently in receipt of housing benefit?		
Gross monthly income (before tax)		
Do you have savings or assets of over £250,000 or own a property?		

PART G: Your Employment / Training

If you are currently employed please complete the following information:

If you are in Employment:	First Applicant	Second Applicant
Employers Name		
Your Job Title		
Employers Address		
How long have you been employed there? <i>(please send proof of employment)</i>		
Are you on a permanent contract? If not please state the type of contract you have		

Mount Green Housing Association

Application for Independent Living Accommodation

PART H: Agreement and Declaration

<i>Declaration of Interests Form</i>	<i>Yes (tick)</i>	<i>No (tick)</i>
<i>Are you or your partner a close relative* of a Mount Green staff member or a Mount Green Board Member?</i>		
<i>Do you, your partner, or a close relative occupy a property which is owned or managed by Mount Green Housing Association?</i>		
<i>Have you or your partner previously been a tenant, shared owner or Leaseholder of Mount Green?</i>		
<i>Do you or your partner currently hold a tenancy with a Local Authority or Housing Association?</i>		
<i>If you have answered yes to any of the questions above please provide further details below.</i>		
<p>Failure to make proper disclosure may invalidate any offer of accommodation. Tenancy fraud checks may be carried out using the information provided in this document.</p> <p>By signing this form you are declaring that everything that is documented to be true and factual. You give consent for your personal data contained on this form to be processed for the purpose of your application to Mount Green and for statistical purposes.</p> <p>I acknowledge receipt of the Privacy Notice which I confirm I have read and understood.</p>		
Signed	Dated	



We will process the information contained in this form to comply with the requirements of the Data Protection Act 1988 and the Commission for Racial Equality. Data may also be used to produce de-personalised statistics. Under the Act you are entitled to request, in writing and with the appropriate fee, copies of certain information we hold about you.

If you require any help completing this form please contact us on 01372 379 555.

Please return your completed form to:
Mount Green Housing Association, 26 Bridge Street, Leatherhead, Surrey, KT22 8B

*A close relative includes someone's husband, wife, partner, parents, grandparents, children, grandchildren, brothers, sisters, and similar relations by marriage also count as 'close'.

Mount Green Housing Association

Application for Independent Living Accommodation

Equal Opportunities

This information is optional and if you chose not to complete it your application will not be affected.

Mount Green operates a policy of equal opportunities in all aspects of its work. Our policy is to provide a good standard of housing for those in need, regardless of gender, race, ethnic or national origin.

To ensure that this policy is carried out, we constantly monitor those who apply to us for housing, and those we house, to make sure that applications are treated strictly on the basis of housing need.

Please describe the ethnic origins of your household (tick the appropriate boxes)

White: British		Black/Black British: Caribbean	
White: Irish		Black/Black British: African	
White: Other		Black/Black British: Other	
Mixed: White and Black Caribbean		Chinese/Other ethnic group: Chinese	
Mixed: White and Black African		Chinese/Other ethnic group: Other	
Mixed: White and Asian		Gypsy/Romany/Irish traveller	
Mixed: Other			
Asian/Asian British: Indian		refused	
Asian/ Asian British: Pakistani			
Asian/Asian British: Bangladeshi			
Asian/Asian British: Other			

Religion (please tick)

None		Muslim	
Christian (including C of E, Catholic, Protestant and all other Christian denominations)		Sikh	
Buddhist		Any other religion	
Hindu		Do not wish to disclose	
Jewish			