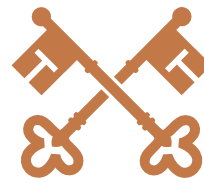


Application for almshouse housing

Guidance notes



Liversage
Trust

For the people of Derby
Since 1529

Please read these notes before completing the application form

Submitting an application does not guarantee that you will be accepted on to the Liversage Trusts Almshouse waiting list. To be eligible for rehousing in a Liversage Trust almshouse you must meet the qualifying criteria detailed below. You may provide relevant additional information in support of your application, which can also be used to determine any additional priority for your circumstances.

It is important that you complete the form fully and include all information that you want to be considered. An incomplete form could cause a delay in processing your application or we may have to return it to you.

Please complete the form in black ink and ensure the hand writing is legible. Please fill in every part of the form fully, and if you feel section doesn't apply, mark it with N/a (not applicable).

Qualifying Criteria

To be eligible for rehousing into an almshouse with Liversage Trust, an applicant must meet all three of the following criteria:

1. You must be in housing need, hardship or distress – Any applicant whose total assets are over £23,250 is not considered to be in housing need. Assets include savings, bonds, investments and property / land ownership.
2. Applicants must be 60 years of age or over.
3. Applicants must have resided in Derby for five continuous years prior to application. Any applicant who has lived out of Derby for even a short time within the last five years will not be eligible, even if they have lived in the city for the majority of their life.

What happens next

Once you have completed the application form, return it to our office, bringing with you the verification documents for copying. Once your application has been assessed you will be notified in writing whether or not you have been accepted to the waiting list. All applicants will be invited to meet with Trustees prior to any offer of accommodation.

All forms should be returned to:

Liversage Trust, 6a Liversage Almshouses, London Road, Derby DE1 2QW

Email: info@liversagetrust.org

Document Checklist

Please send us ALL of the documents that apply to you and any other applicant.

Please note that some documentation may cover more than one area; in which instance, please provide one copy only, per person.

Failure to provide all documentation will prevent us from registering your application.

Right to rent:

Each applicant must have citizenship in an EU country, or limited, indefinite or exceptional leave to remain in the UK, with access to public funds.

Please provide a copy of each applicant's passport or UK Birth certificate.

National Insurance number:

Please provide a recent payslip, N.I. card, benefit letter, HMRC document or any other official document that shows a N.I. number for each applicant.

Proof of age:

You may have already provided this on your "Right to rent" documentation

Proof of address:

Please provide proof that you have been resident in Derby for the last 5 years continuously.

This can be a Bank Statement, Utility Bill or any other official document with a name, address and a date on it.

Proof of savings / Financial circumstances:

Please provide copies of the last three months statements, for any bank or building society accounts, bonds or investments.

If you own a property, please also include a property valuation and / or mortgage statement, as appropriate.

Proof of benefits:

Please provide copies of any government benefits, allowances or pensions that each applicant receives.

Supporting information

Please provide any independent evidence or information in support of additional priority for your application.

E.g. letter from a medical professional or social worker.

Tenancy agreement:

If you have a signed tenancy agreement, licence, a rent book or other agreement for the property you are renting, please provide us with a copy.



Liversage Trust

For the people of Derby
Since 1529

T: 01332 348155

E: info@liversagetrust.org

www.liversagetrust.org

Application for Almshouse Housing

The Liversage Trust provides almshouses for people aged 60 years and over, who are in need, hardship or distress as a consequence of their current housing situation. A weekly visiting service and emergency call alarm is available. Residents occupy homes as a beneficiary of the Charity, not as a tenant, and weekly sums payable are regarded as maintenance contributions, not rent.

If you would like to be considered for one of our properties and meet current eligibility criteria, please complete this form, referring to the guidance notes provided; this details the information and supporting evidence that we require to process your application quickly. Wherever necessary, please continue any section on a separate sheet of paper and submit this with the form.

1. Applicant's personal details			
Applicant's name (including title):		Date of birth:	
		N.I. number:	
Joint applicant's name (including title):		Date of birth:	
		N.I. number:	
Applicant's current address:			
Time at address:		Postcode	
Mobile phone:		Home phone:	
Email Address:			
List anyone who lives with you now and will not be moving with you:			
Name:		Relationship:	
Name:		Relationship:	
Name:		Relationship:	
Name:		Relationship:	

2. Previous addresses over the last 5 years

Full address including postcode	Dates of occupation	If rented, landlord name and address.

3. About you

Do you own a pet	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you own a vehicle	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you related to any existing Liversage Trust resident, employee or Trustee?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you own any property or land, either in the UK or abroad?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have more than £23,500 in savings or assets?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have criminal convictions which have not been spent under the terms of the Rehabilitation of Offenders Act 1974?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been evicted from a rented property or had legal action taken against your tenancy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Answering yes to any of these questions, does not always mean that you will be excluded from the waiting list. If you have answered yes to any of the above, please give further details:

4. Where you live now

Please tick which apply:

House Flat Bungalow Shared accommodation Caravan / Mobile Home

How many bedrooms are in your home?

If you live in a flat, which floor? (ie; Ground / First)

Do you:

Own your home

Live with family

Sofa surfing

Rent your home

Live with friends

Other Please state below

If you rent your current home:

Landlord's name, address and telephone number.

Please note we will contact your current landlord for a reference

How much is your current rent? (state weekly or monthly)

Is your rent paid up to date?

Yes

No

If no, please state the amount owed and the reason for arrears

If you own your current home:

What is the estimated value?

How much equity do you have in the property?

What is your estimated timescale for moving and your plans for the owned property?

5. Have you applied to anyone else for re-housing

If yes, please tell us who:

If no, please tell us why not:

6. Why you want to move

Please give us as much information as possible to support your application. Include any health or social reasons (continue on a separate sheet if necessary):

7. Where you want to move to

Estate:	Property type:	Please tick all that you would consider
Arthur Hind Close	1 bed bungalow	<input type="checkbox"/>
	2 bed house	<input type="checkbox"/>
Nottingham Road	2 bed house	<input type="checkbox"/>
	2 bed flat	<input type="checkbox"/>
London Road	1 bed house	<input type="checkbox"/>
	1 bed bungalow	<input type="checkbox"/>
Franchise Street / Drewry Lane	1 bed bungalow	<input type="checkbox"/>
	1 bed flat	<input type="checkbox"/>
	2 bed flat	<input type="checkbox"/>
	3 bed house	<input type="checkbox"/>

8. Financial circumstances

	You	Your partner
If you still work:		
Who is your employer?		
What are your average earnings?	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
If you receive benefits:		
How much housing benefit or Universal Credit housing costs do you receive?	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
Does this cover the full or partial amount of your rent?		
What other benefits do you receive? (list all that you currently receive)		
	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly

	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
How much state pension do you receive? (if applicable)	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
How much private pension do you receive? (if applicable)	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
Total of any other regular income (Eg: Income from rental or holiday properties)	£ Weekly/fortnightly/monthly	£ Weekly/fortnightly/monthly
Total savings and / or investments	£	£
Please state value of any other assets (eg second property, land owned, motor home, static caravan)	£	£

9. Next of kin

1 - Name:	Relationship:	Address:	Telephone:
2 - Name:	Relationship:	Address:	Telephone:

10. References

Please provide two referees. One should be someone who has known you for three years but is not related to you, the second should be your current or former landlord.

Reference One:	Reference Two:
Name:	Name:
Address:	Address:
Telephone:	Telephone:

11. Assistance in completing this form:

If this form has been filled in by someone other than the applicant, please tell us why you are completing this form:

Name:

Relationship to applicant:

Signature of the person:

Date:

12. Declaration

Please read the following statements and sign below. We cannot process your application if you have not signed.

- I declare that the information given in this application is true and complete.
- I understand that if any information I have given is incorrect or incomplete, that the Trust may take legal action against me and this could result in me losing my home.
- I authorise Liversage Trust to check any of the information given on this form.
- I know that I must notify the Trust if any of my circumstances change after I make this application.
- I understand that no sub-letting is permitted under the terms of a Liversage Trust tenancy.
- I authorise my current and previous landlords to disclose information to Liversage Trust relating to my tenancies and conduct.

Main applicant's signature:

Date:

Joint applicant's signature:

Date:

DATA PROTECTION STATEMENT

The information which you give when completing your application form will be used in accordance with the Data Protection Act 1998 and the General Data Protection Regulation. Your information is held for the following purposes: to enable the Trust to create an electronic and paper record of your application; to enable the application to be processed; to enable the Trust to compile statistics, or to assist other organisations to do so, provided that no statistical information that would identify you as an individual will be published. The information will be kept securely, and will be kept no longer than necessary. Some details may be checked with relevant organisations but none will be disclosed for any inappropriate purpose. You may have access to your personal information on request.

