



Registered Office

Beech House
28-30 Wimborne Road
Poole
BH15 2BU

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Email: info@sandbourne.org.uk
Website: www.sandbournehousingassociation.org.uk

**Application for Rented Accommodation in Bournemouth
(60+ years old)**

Please note that if you wish to apply for one of our 60+ properties in Ringwood, you will need to ask for and complete a separate Ringwood application form.

1. General Information

First Applicant

Please circle below

Mr / Mrs / Miss / Ms
Refused / None

First name(s) _____

Surname _____

Date of birth _____

(DD / MM / YY)

National

Insurance No: _____

Joint Applicant

Please circle below

Mr / Mrs / Miss / Ms
Refused / None

First name(s) _____

Surname _____

Date of birth _____

(DD / MM / YY)

National

Insurance No: _____

Contact Details

Address _____

Postcode _____

Telephone no. _____

Mobile no. _____

Email address _____

How long have you lived within the Bournemouth Council area (this will be Bournemouth, Christchurch and Poole Council from 1 April 2019), or what strong family or work connections do you have within that Council's administrative area?

How did you hear about us? _____

Are you related to any member of Sandbourne's Board or an employee? Yes/No

If yes, please state who and your relationship _____

2. Present accommodation

How long have you lived in your present accommodation? _____

Do you own this or any other property? Yes/No

If yes, you will be asked to provide a written valuation for any such property and say what capital (money) you can expect to obtain from it, if and when we are in a position to help you.

If owned, is your property mortgaged? Yes/No

If yes, what is the estimated outstanding amount of the mortgage? £ _____

Do you rent your accommodation? Yes/No

If yes, please give details of your landlord below:

Do you hold a lease on your accommodation? Yes/No

If yes, please say how long is left on the lease _____

Do you have a tenancy agreement? Yes/No

If yes, what type of tenancy agreement do you hold? (please tick)

Housing association Local authority (Council) Private landlord

Other, please state: _____

Have you lived at your present address for less than one year? Yes/No

If yes, please give the following information:

Previous address: _____

Did you own or rent that property? _____

When did you leave that address? _____

Why did you leave that address? _____

Please tell us about your accommodation requirements and preferences:
(you can tick as many boxes as you like)

Stourwood Avenue, Southbourne (flats)

Gladman House	<input type="checkbox"/>
Harling House	<input type="checkbox"/>
Milne Court	<input type="checkbox"/>
St Kilda	<input type="checkbox"/>
Woodlands	<input type="checkbox"/>

Belle Vue, Southbourne (flats)

Harcourt Grange	<input type="checkbox"/>
Highfield	<input type="checkbox"/>
Redlands Court	<input type="checkbox"/>

Wimborne Road, Winton (flats)

Ace Court	<input type="checkbox"/>
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Bedroom requirement/preference

One-bedroom

Two-bedroom

Bathroom requirement/preference

Bath

Shower

Shower over bath

No preference

Floor level (all blocks of flats have a lift)

Ground

First

Second

Third

Any

3. Health

Do you consider that your present accommodation is affecting your health? Yes/No

If yes, please tell us why (if two people applying, please give details of both)

Are you able to live independently? Yes/No

If no, please tell us what care and/or support you require

If you require support, what arrangements would you make to ensure that you can manage your home and your tenancy if you were offered Sandbourne Housing Association accommodation?

Do you have any long-term medical conditions? Yes/No

If yes, please tell us what these are

4. Financial

Please tell us about your financial situation (if two people applying, please give joint income)

Total of any capital or savings (or assets including the value of your property, or other assets, eg boat, timeshare, etc), for asset, please say what you would expect to receive if sold. £ _____

Income from earnings (net)	£ _____	per week	<i>Please do not leave any blank amounts in section 4. If none, please put a zero in that space.</i>
State pension	£ _____	per week	
Occupational pension	£ _____	per week	
Other pension	£ _____	per week	
Other benefits	£ _____	per week	

If you receive other benefits, please tell us what you are currently receiving and the weekly amount:

Please now give any further information in support of your application. In particular, please give your reasons for applying for accommodation.
(please continue on a separate sheet, if necessary)

I declare that the statements made in this application are true and correct to the best of my knowledge.

I confirm that I need 60+ accommodation or I will have such a need within the foreseeable future.

I understand that if I am offered and accept an offer of accommodation and it is discovered that this information is false or misleading, that my tenancy may be repossessed by the Association by application made to the county court.

I agree that Sandbourne may disclose my information, contained in this application and/or any supporting documents, for the purpose of checking the accuracy of the information. This is needed for assessing housing need, eligibility and/or prevention of fraud.

I understand that Sandbourne will not otherwise use or disclose my information to anyone else or other organisations or use it for marketing purposes.

I agree for my information to be used for this purpose.

First Applicant

Signed: _____ Date: _____

Print Name: _____

Joint Applicant

Signed: _____ Date: _____

Print Name: _____

[Please note that if your application is cancelled, it will normally be confidentially destroyed after six months. You can, however, seek to re-apply at any time and any new application will be registered (with a new registration date of when it is received by us) and considered based on your circumstances and our criteria at that time.]

Reviewed February 2019