



**Registered Office**

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28-30 Wimborne Road  
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Email: info@sandbourne.org.uk  
Website: www.sandbournehousingassociation.org.uk

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

Please note that if you wish to apply for one of our 60+ properties in Bournemouth, you will need to ask for and complete a separate Bournemouth 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 Parish of Ringwood, or what strong family or work connections do you have within the Parish of Ringwood'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, 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 flat)  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 the 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)

### Ringwood (60+)

Christy Close (flats)	<input type="checkbox"/>	Addison Square (1 x 3 bed bungalow)	<input type="checkbox"/>
Guys Close (flats)	<input type="checkbox"/>	Hightown Gardens (2 x 2 bed bungalows)	<input type="checkbox"/>
Mary Mitchell Close (flats)	<input type="checkbox"/>		

Please note that: There only four two-bedroom flats, which are at Guys Close (2 ground floor and 2 first floor) and there are no passenger lifts at these properties.

**Bedroom requirement/preference**

One-bedroom

Two-bedroom

**Floor level (flats)**

Ground

First

Either

**Bathroom requirement/preference**

Bath

Shower

Shower over bath

No preference

**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)*

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Are you able to live independently? Yes/No

*If no, please tell us what support you require*

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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?

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

*If yes, please tell us what these are*

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**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 considered based on our criteria in force at that time.)