



Sadeh Lok Limited
(Part of the Incommunities Group)
Trafford House, 11 Halifax Road,
Huddersfield,
HD3 3AN
Tel: 01484 435715
Email: customerservices@sadehlok.co.uk
Website: www.sadehlok.co.uk

OFFICE USE ONLY
 Ref:

APPLICATION FOR SADEH LOK LIMITED

Please ensure you complete all sections.
Any uncompleted sections will delay processing your application.

Part 1- APPLICANT DETAILS

You (Applicant 1)	Please give details below:	Your Partner (Joint Applicant 2)	Please give details below:
Surname		Surname	
First Names		First Names	
Title (please delete as applicable)	Mr/Mrs/Ms/Miss/Other:	Title (please delete as applicable)	Mr/Mrs/Ms/Miss/Other:
Marital Status		Relationship to Applicant 1	
Date of Birth		Date of Birth	
National Insurance No.		National Insurance No.	
Home Phone Number		Home Phone Number	
Work Phone Number		Work Phone Number	
Mobile Number		Mobile Number	
Email Address		Email Address	
Nationality		Nationality	
First language		First language	

If we contact or visit you, do we need an interpreter or someone to help with communication?

Yes No

If Yes, please give details: _____

Your current address:

Postcode:

Do you want us to send your correspondence to a different address?

If so, please give that address:

Postcode:

Part 2 - ABOUT YOUR HOUSEHOLD

In this section we ask for personal information that you may find sensitive. All information will be treated in confidence but you must answer all questions to allow us to process your application

Please tell us about any other people that live with you, even if they are not moving with you. Also provide proof that all those listed below do live with you, for example copy of medical cards. If you do not provide this evidence we may not be able to award points for overcrowding.

Full Name	Date of Birth	Gender (M/F)	Relationship To you	Is this person living with you now 'Yes' or 'No'	Will this person be moving with you 'Yes' or 'No'
1					
2					
3					
4					
5					
6					
7					
8					

Yes No

Are you or anyone else who wishes to move with you expecting a baby?

If 'Yes' give the date the baby is due/...../..... and enclose proof of pregnancy, eg MAT B1

Part 3 – YOUR PRESENT HOME

How many bedrooms are there in your present home? _____

Are you lacking any of the following facilities or sharing with people who are not family or friends?

Type of Property?

	Lacking	Sharing	
			House <input type="checkbox"/>
Kitchen	<input type="checkbox"/>	<input type="checkbox"/>	Bungalow <input type="checkbox"/>
Bathroom	<input type="checkbox"/>	<input type="checkbox"/>	Flat <input type="checkbox"/>
Living Room	<input type="checkbox"/>	<input type="checkbox"/>	Bedsit <input type="checkbox"/>
Inside WC	<input type="checkbox"/>		
Hot Water Supply	<input type="checkbox"/>		

Part 3 – YOUR PRESENT HOME

In this section we ask for personal information that you may find sensitive. All information will be treated in confidence but you must answer all questions to allow us to process your application

Please indicate which of the following best describes your present situation:

I own my own home <input type="checkbox"/>	I live with friends or relatives <input type="checkbox"/>
I own my own home through a 'Shared Ownership' or similar scheme <input type="checkbox"/>	I live in a caravan/mobile home/boat <input type="checkbox"/>
I rent from a Housing Association <input type="checkbox"/>	I am waiting to be discharged from hospital/residential care <input type="checkbox"/>
I rent from a Local Authority <input type="checkbox"/>	I am in HM Forces <input type="checkbox"/>
I rent from a private landlord <input type="checkbox"/>	I am in prison <input type="checkbox"/>
I rent from my employer <input type="checkbox"/>	I live in a hostel, B&B or refuge <input type="checkbox"/>
I am a lodger/sub tenant <input type="checkbox"/>	I have no fixed address <input type="checkbox"/>
I live with my parents <input type="checkbox"/>	Other (please specify below) <input type="checkbox"/> _____

If you rent your accommodation please give your Landlord's details:

Landlords Name: _____

Landlords Address: _____

Date tenancy commenced:/...../.....

Do you owe any arrears? Yes No
If Yes, how much £ _____

Please tick if any of the following statements apply to you or the joint applicant
If you tick any of the boxes, please enclose copies of any relevant letters you have received from your landlord, employer, lender or family

	You the applicant	Joint applicant	Date you must leave
I have received a 'Notice to Quit' (Section 21 Notice) from my Landlord	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I rent my home but don't have a written tenancy agreement	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I rent my home and have a assured shorthold tenancy	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I rent my home and have an assured tenancy	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
My/our house is to be repossessed or demolished	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I have to leave my house, which I rent from my employer	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I am leaving the forces/forces accommodation	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__
I have been asked to leave my family/friends home	<input type="checkbox"/>	<input type="checkbox"/>	__/__/__

Other please state: _____

Part 3 – YOUR PRESENT HOME

Do you think that your home has any of the following problems?

My home has structural problems/is unstable

My home has very bad dampness/water penetration

My home has moderate dampness/water penetration

My kitchen or bathroom does not have a window or other ventilation (like a fan)

Access to my home is dangerous or awkward

Please provide copies of letter(s) from Private Sector Housing that they have inspected your property and a notice has been served on your landlord to carry out any repairs.

Please remember that we will visit you to make sure that the information provided on this form is accurate. This will involve looking at the property and any problems it might have.

Part 4 – YOUR PREVIOUS ADDRESSES

In this section we ask for personal information that you may find sensitive. All information will be treated in confidence but you must answer all questions to allow us to process your application

Please give details of all the addresses where you have lived in the past 5 years.

Address	Dates you lived there:		If rented – name& address of landlord. If owned - write O/O	Reason for leaving
	From	To		
/...../...../...../.....		
/...../...../...../.....		
/...../...../...../.....		
/...../...../...../.....		

Part 4 – YOUR PREVIOUS ADDRESSES

Do you have any rent arrears at any of the previous addresses?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please say how much you owe:	£ _____	
Have you ever been evicted from a property because you broke the Tenancy Agreement or failed to pay your rent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give address of property and reason:		
Have you or any member of your household been a tenant of Sadeh Lok Housing before or lived in a Sadeh Lok property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give address of property:		
Dates you lived there From/.../..... to/.../.....		
Whose tenancy was this?		

Part 5 –PERSONAL INFORMATION

Have you ever been convicted of a criminal offence	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, please give details:		
In which Court were you sentenced:		
If you served a prison term, please give dates:		
From/.../..... to/.../.....		

Part 6 – WHY DO YOU WANT TO MOVE

Are you or anyone who will be moving with you experiencing any form of harassment or abuse?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you or anyone who will be moving with you have a medical condition which is affected by your current housing circumstance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you or anyone who will be moving with you need any assistance or support or currently receive support?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Does any household member consider him/herself to have a disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>
Does any household member use a wheelchair?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>

If anyone in your household has a disability, does this affect the housing you require?

If so, please explain:

If you have answered Yes to any of the above questions please provide supporting evidence in order for us to award you points.

Please tick as many boxes as you feel apply to your situation and then circle the single most important reason why you need a new home:

Pregnancy	<input type="checkbox"/>	Family living separately	<input type="checkbox"/>
Leaving Armed Forces	<input type="checkbox"/>	Problems with neighbours	<input type="checkbox"/>
To take up employment in this area	<input type="checkbox"/>	Difficulty paying rent/mortgage	<input type="checkbox"/>
Landlord selling property	<input type="checkbox"/>	Relationship breakdown	<input type="checkbox"/>
Eviction Order or Repossession	<input type="checkbox"/>	Domestic violence	<input type="checkbox"/>
Leaving Hospital or other institution	<input type="checkbox"/>	Medical problems	<input type="checkbox"/>
Leaving a hostel	<input type="checkbox"/>	Dislike area	<input type="checkbox"/>
Losing home with job	<input type="checkbox"/>	Racial harassment	<input type="checkbox"/>
Need smaller/larger accommodation	<input type="checkbox"/>	Other types of harassment	<input type="checkbox"/>
Leaving parental or family home	<input type="checkbox"/>	To give/receive support to or from family/friends	<input type="checkbox"/>
To live together or get married	<input type="checkbox"/>	To be near friends or family	<input type="checkbox"/>

In as much detail as possible please tell us why you want or need to move, please continue on a separate piece of paper of necessary:

Part 7 – WHERE TO YOU WANT TO LIVE

Please read the sections “Choosing where you want to live” and “Property List” in the booklet we have given you before filling in this section. Choose only the schemes you would really move to if offered accommodation there.

List ALL the schemes you are interested in by their name for example, “Spire Court”.
Do not enter only “Batley” or “Huddersfield”.

You will only be considered for the schemes you have listed above.

You will only be accepted onto the waiting list if you have enough points for the areas you have chosen. We will calculate how many bedrooms suit your household

Please tick your preferred type of accommodation:

House

Ground Floor Flat

First Floor Flat (or above)

Accommodation for 55+

Do you have any pets? Please give details: _____

(Pets are not permitted on schemes with a shared communal entrance or shared garden).

Part 8 – RELATIONSHIP TO STAFF OR BOARD MEMBER/S

To your knowledge, are you or any member of your family related to any member of the Sadeh Lok’s staff or Board?

Yes

No

Part 9 – MONEY MATTERS

In this section we ask for personal financial information that you may find sensitive. All replies will be treated in confidence but you must answer all questions to allow us to process your application. From the list below please give the economic status of yourself and your household members.

Name	Economic Status	Give details of income
1		£
2		£
1		£
2		£
3		£
4		£
5		£
6		£
7		£
1 = Fulltime work of 30 or more hours per week	6 = Not seeking work	
2 = Part-time work being less than 30 hrs per week	7 = Full-time student	
3 = In training – i.e. New Deal	8 = Unable to work due to long term sickness/ disability	
4 = Job seeker	9 = Child under 16	
5 = Retired	0 = Other adult	

Please provide full details of income of applicant and joint applicant

Income	Amount	How Often?
Take Home Pay	£	
Working Families Tax Credit	£	
Child Tax Credit	£	
Child Benefit	£	
ESA	£	
Disability Living Allowance/PIP	£	
Income Support	£	
Job Seekers Allowance/Employment Seekers Allowance	£	
Personal Pension	£	
State Pension/Pension Credit	£	
Other Income (please state)	£	

Do you currently receive Housing Benefit? Yes No

Do you currently have a bank account? Yes No

Please note: it is a requirement of Sadeh Lok that if you pay part or all of the rent for your home you must make payments by Direct Debit from a bank account; if you currently do not have a bank account Sadeh Lok may be able to assist you in setting-up a bank account

Part 10 – ETHNIC ORIGIN & FAITH GROUP OF YOUR HOUSEHOLD

What is your ethnic origin? Please tick one box for each person.

	Applicant		Other people							
	1	2	1	2	3	4	5	6	7	
White:										
British										
Irish										
Bosnian										
Polish										
Other please state:										
Dual Heritage/Mixed Race										
White & Black Caribbean										
White & Black African										
White & Asian										
Other please state:										
Asian or Asian British:										
Pakistani										
Indian										
Bangladeshi										
Other please state:										
Black or Black British:										
Caribbean										
African										
Other please state:										
Other ethnic group:										
Chinese										
Iraqi										
Iranian										
Afghan/Kurdish										
Other please state:										
Prefer not to say:										

What is your religion? Tick one box for each person.

	Applicant	
	1	2
Christian		
Hindu		
Muslim		
Sikh		
Jewish		
Buddhist		
Other please state:		
None		

Do you or any person who lives with you, have any religious or cultural preferences that you would like us to be aware of when we visit you or when you call into the office?

Please state:

Part 11 – DISABILITY IN YOUR HOUSEHOLD

Does any member of your household consider themselves to be disabled?

(The Disability Discrimination Act 1995 defines disability as a ‘physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities’).

		Applicant		Other People						
		1	2	1	2	3	4	5	6	7
Yes										
No										

If you have answered ‘Yes’ to the above question please tell us the nature of the disability of each person.

		Applicant		Other people						
		1	2	1	2	3	4	5	6	7
Wheelchair user										
Mobility impairment										
Physical co-ordination impairment (includes problems of manual dexterity and muscular control e.g. incontinence, epilepsy)										
Reduced physical capacity (includes debilitating pain and lack of strength, breath e.g. from angina, asthma or diabetes)										
Hearing impairment										
Visual impairment (not corrected by spectacles or contact lenses)										
Speech impairment										
Severe disfigurement										
Learning disabilities										
Mental illness – substantial & long lasting – more than a year										

Do you or any person that lives with you, have any disability related needs that you want us to be aware of when we visit you at home or when you call into our offices?

If Yes Please give details:

Part 11 – DISABILITY IN YOUR HOUSEHOLD

Do you have a support worker, family member or friend who helps you with housing matters?

Yes No

If Yes, do you give permission us to discuss issues concerning your tenancy with this person?

Yes No

If Yes, please give details below:

Who does this person support?	
Name of support person	
Relationship, for example family member, support worker	
Address	
Postcode	
Telephone Number	
Please give us details of your next of kin/preferred contact to contact in the event of an emergency.	
Name	
Relationship to you	
Address	
Postcode	
Telephone Number	

Part 12 – COMMUNICATION

What is your first language? _____

If English is your first language and you have difficulty with reading and writing please tell us below.

Applicant

1

2

I have difficulty with reading

I have difficulty with writing

Please tick the box if you are a British Sign Language user

If English is not your first language are you able to speak or read in English?

If Yes tick the box below

Applicant

1

2

Speak

Write

If you are unable to speak or read in English please tell us the language you would like us to communicate with you in:

Applicant

1

2

Written

Spoken

If you would prefer the information you receive from us to be in any of the alternative formats below, please tell us. Tick any boxes that apply.

Applicant

1

2

Large print

Braille

Audio tape/disc

Other please specify:

Part 13 – ADDITIONAL INFORMATION

Regulations were introduced in October 2006 to prevent discrimination against lesbian, gay and transgender people. If you are willing to share this information please complete the following.

Applicant		
Gender	1	2
Male		
Female		
Prefer not to say		
Applicant		
Sexuality	1	2
Lesbian		
Gay		
Bisexual -attracted to men and women		
Heterosexual/Straight		
Prefer not to say		
Applicant		
Transgender	1	2
Is your identity the same as you were assigned at birth? State yes or no		
Do you live fulltime in the gender role opposite to that assigned to you at birth?		

Part 14 – STATEMENT

YOUR DATA

The information you give in this form is subject to the requirements of the Data Protection Act 1998. By signing this form you are providing Sadeh Lok Limited with consent to use your personal and sensitive data that you have provided. Your personal details (personal and sensitive data) will be held and processed by Sadeh Lok Limited to help assess your needs and, in particular, the provision of services for which you may be eligible.

Sadeh Lok Limited requires the information on this form to process your application to join the housing register. If your application for housing is successful the information supplied in this form will also be used for housing management purposes.

The personal details you provide (personal and sensitive data) may also be shared with certain external agencies that help assess and/or give services, as part of, but not limited to, any statutory duties requiring such a disclosure and to protect the public funds it collects and administers. Any data may be used to prevent fraud or the misuse of resources.

You may ask for a copy of your personal information and how it is stored and used by writing to us at our Huddersfield Office.

FRAUD

We are committed to preventing and detecting all fraud. It is an offence under the Forgery and Counterfeiting Act 1981 to hold or present false documents such as birth certificates, passports, bank statements and so on, with a view to obtaining goods or services such as temporary accommodation or permanent housing from Sadeh Lok Limited. If we detect fraud, we will take legal action against you.

CHANGE OF CIRCUMSTANCES

It is important that you tell us about any change in your circumstances as this may affect your housing application. Please contact us immediately if your circumstances change, for example, if your address changes or your household members change.

FALSE STATEMENTS

To prevent abuse of the housing register, it is a criminal offence for anyone to try to obtain accommodation from Sadeh Lok Limited by knowingly or recklessly giving a false statement or knowingly withholding information. Offences under these provisions are prosecuted in the magistrate's court. Sadeh Lok Limited will seek possession of a tenancy that was granted as a result of a false statement.

Signed _____
(Applicant)

Signed _____
(Joint Applicant)

Date _____

<p>FOR OFFICE USE ONLY Action/Information Requested:</p> <p>Date _____ By: _____</p>		<p>Points</p>
<p>Action/Information Requested:</p> <p>Date.....By:</p>		<p>Size</p>
<p>Action/Information Requested:</p> <p>Date.....By:</p>		<p>Areas</p> <p>Date.....By:</p>