

Housing Waiting List

Eastern Region

Application Form
and
Guidance Notes

Housing Application

Part 1 - Guidance Notes

Part 1 of this form should be treated as guidance only for completion of the waiting list application form.

You may also qualify to be included on The First Time Buyers List. Inclusion on this list will not prevent you from being on the Public Sector Housing waiting list, and you should contact the Department of Infrastructure Customer Services team for more information (01624) 685955.

Please read these notes **prior** to completing the application form.

1. Acceptance Criteria

- The normal residential qualifications for acceptance on the waiting list and/or allocation of accommodation are:-
 - a) Minimum of 10 years residence in the Isle of Man; and
 - b) Minimum of 3 years residence in the area of the combined housing waiting list
- The residential qualifications do not need to be continuous or immediately prior to the application. (but you will be required to provide proof of residence).

Your total income must not exceed the amounts specified in the following table.

Number of dependent children	Maximum gross annual income	
	Single applicant	Joint applicant
None	£30,000	£33,000
1 child	£35,000	£38,000
2 children	£38,000	£41,000
3 or more children	£41,000	£44,000

- At least one of the applicants must be 18 years of age.

2. Allocation Criteria

- With regard to the allocation of properties a points system is applied to every housing application.
- The aim of the points system is to assess each applicant by a common set of standards in relation to prioritise their housing needs.

3. Application Form

- The application form should be completed in block capital letters.
- All questions **must** be answered. (If the answer is "none" state "none" or if not applicable state "n/a"). Or enclose relevant supporting documentation.
- **Failure** to complete any part of the application form **will** result in the form being returned to the applicant without consideration.

- You should include details of all addresses and years of residence at previous addresses you have lived in, as failure to do so could affect your housing points and increase your waiting time.

Question 1 – Applicant Details

- In order to be considered, the full name of all applicants must be given.

Question 2 – Applicant’s Status

If you are married or intending to live as a couple, your application will be joint if both applicants are residentially qualified.

Question 3 – Current Address

- You must provide a current utilities bill, bank statement, or similar documentation showing your present address when submitting your application.

Questions 4 and 5 – Date/Place of Birth

- You must provide original or certified copies of birth certificates for each applicant and any other persons requiring housing with you.

Question 6 – Number Of Years Resident On The Island.

- Details must include all addresses, and whenever possible the dates of residency should include month and year (e.g. May 2005).
- You may be asked to supply some proof of your previous addresses.

Question 7 – Number of Years Resident in the Housing Area.

- The total time residing in the regional area which falls within the boundaries of the combined housing waiting list need not be continuous or immediately prior to the application but must total three years or more.

Questions 8 and 9 – Occupation and Employer

- You will be required to submit a minimum of three most recent payslips to support your application.
- If you are self-employed you should note that it is not permitted to carry on any trade, profession or business from a public sector property without written approval from the Department of Infrastructure or Local Authority (the ‘housing providers’).

Question 10 – Income

- Income is based on all gross annual income (this is before tax and deductions). The applicant(s) must submit at least three recent wage/salary slips, in respect of each of the applicants, as evidence of income, plus proof of any benefits, including child benefits, and/or pensions.
- If you are self-employed you will need to show your previous two years’ audited accounts. If audited accounts are unavailable, please submit copies of your income tax assessment(s). You may be required to provide authority to approach the tax office for confirmation of proof of income.
- Where an applicant is in receipt of benefits, a copy of the most recent award letter must be provided. Submission of the application form implies approval for the housing providers to approach Social Security to verify details of any benefits received by the applicant(s).

Question 11 – Savings

- You must provide details of all your savings and any investments which you or your partner may have.
- This should include the proceeds of sale of a previous property whether solely or jointly owned.

Questions 12 and 13 – Other Persons Requiring Accommodation/Housing

- You must provide original or certified copies of birth certificates for each applicant and any other persons requiring housing with you. Children aged between 18 and 21 who are in full time education may be considered as part of the household.

Question 14 – Accommodation Required (Refer to enclosed map)

- It is important you think carefully about where you would like to live, as **unjustified refusal** of a property offered will result in a deduction of housing points.
- Please indicate clearly the areas you wish to be considered for on the map on page 16. Also refer to the map on page 16 for guidance. Applicants may have up to 4 choices according to their housing need.
 - 1) Anywhere in the East of the Island (all 3 areas excepting Onchan)
 - 2) A specific Parish or Parishes in the East up to 3 choices (excepting Onchan)
 - 3) A choice of 2 parishes outside of the Eastern Region
 - 4) Anywhere on the Island

Note: if you indicate a preference for a Parish and subsequently reject an offer of accommodation without good reason, you may have points deducted for unjustified refusal.

For example:

<p>An applicant wishes to be offered a property from anywhere in the eastern region *</p> <p>*Excepting Onchan which is not on the combined list.</p>	<ul style="list-style-type: none"> • Tick the box “ I will live anywhere in the East” only <p>You will then be considered for all 3 Eastern locations.</p> <p>*applicants wishing any of their choices to be Onchan must apply through Onchan District Commissioners Offices and will not be eligible for inclusion onto the combined housing list</p>
<p>An applicant wishes to be offered a property from anywhere in the eastern region but has a preference for where they would like to live.</p>	<ul style="list-style-type: none"> • Tick the box “ I will live anywhere in the East” • Complete Choice 1 through to Choice 3 in order of priority to you. <p>For example – 1st preference: Braddan, 2nd Laxey, 3rd Lonan</p>
<p>An applicant wishes only to be offered a property from a selection of parishes of their choosing within the eastern region.</p>	<ul style="list-style-type: none"> • Do NOT tick the box “ I will live anywhere in the East” • Complete Choice 1 through to Choice 3 in order of priority to you. Choice 1 only where you have only one selection, Choice 1 and Choice 2 for 2 selections etc...
<p>An applicant would additionally consider a DOI property outside the eastern region</p>	<ul style="list-style-type: none"> • Refer to the map on page 16 for other parishes shown in white (numbered 3-18) and complete the section for Parish 1 or Parish 2 <p>For example – 1st preference: Marown, 2nd Santon</p>

An applicant would be prepared to be offered a DOI property anywhere on the island	<ul style="list-style-type: none"> • Tick the box " I will live anywhere on the Island"
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Question 15 – Present Accommodation

- You must produce your rent book if you are currently in, or have recently left rented accommodation. If you do not have a rent book, then please provide the name and address of your landlord.
- As part of the assessment process an Officer from any of the housing providers, or other agency, e.g. Environmental Health, may be required to carry out an inspection of your present accommodation to evaluate any particular difficulties relating to such accommodation.
- The submission of the application form will imply approval to such an inspection which, if necessary, will be arranged at a mutually convenient time.

Question 16 – Details of Property Ownership

- Owners/occupiers (existing or recent) are not automatically barred from applying for public sector housing; however, the applicant(s) will need to satisfy the housing provider that they have an urgent and compelling need to be rehoused and are not in a financial position to provide their own private accommodation.
- If you are still living in the property or still co-own the property but are not living in it, you must provide a recent valuation of the property, along with proof of any mortgages and/or charges against the property.
 - An applicant shall not be selected by a housing authority for allocation of general needs public sector housing if the applicant or either of the joint applicants owns residential accommodation in any jurisdiction.
 - If the applicant, or either of the joint applicants, owns residential accommodation in any jurisdiction, the applicant may nevertheless be accepted for inclusion on the relevant housing authority's housing waiting list for general needs public sector housing providing all of the following conditions are satisfied prior to allocation.
 - The premises are unsuitable for occupation by the applicant, the premises are being actively marketed with a view to disposal, disposal is anticipated within six months of allocation (further information will be required).
 - The sum of any savings or assets available to the applicant, along with the outstanding value after deductions of any financial charges held against the premises and/or any reasonable fees incurred in connection with the disposal and does not exceed the financial condition of £30,000.
- Where the property is the subject of a divorce or legal separation, upon completion of divorce/legal separation proceedings, it will be necessary to show the legal documentation in relation to the settlement.
- The acceptance of an owner/occupier (existing or recent) is subject to special conditions laid down by the housing provider.

Question 17 – Family Members Living Separately

- Proof of members of immediate family living separately due to lack of suitable accommodation, etc, can include separate rent books, and proof of address details as for question 3.

Question 18 – Medical Conditions/Special Needs

- You must provide us with a 'Priority for Housing Need' form from a health/welfare professional (e.g. Social Worker, Health Visitor, etc) to support any claim that your health or any member of your family's health or welfare is affected by your current accommodation, or if a particular type or location of accommodation is required on health grounds.
- You may be required to fill in a more detailed form in relation to your disability/problem in order that the housing providers can fully assess your housing needs.

Questions 19 And 20 – Notice to Quit/Possession Orders

- You should provide, if applicable, a copy of any Court Order for possession (excluding rent arrears), to leave your present accommodation. (This is not just a simple letter from your landlord requesting that you leave the property).

General Information

- You should read the declaration carefully at the end of the form before signing.
- Any information given in the application form may require substantiation and may require the submission of further supporting evidence.
- It is the responsibility of the applicant to notify the housing providers of any change in circumstances which may affect their application.
- Your housing application will be reviewed on an annual basis and you will be required to submit current payslips and to notify the housing providers of any change in circumstances. It is the applicant's responsibility to keep the housing providers up to date with any changes which may affect your application, particularly with regards to change of address.
- If the housing provider is unable to contact you at the address given, you may miss an opportunity for housing and your name will be removed from the housing waiting list.
- The application form must be signed by the applicant, or in the case of a joint application, by both parties.
- Your completed housing application form may be returned to any Local Authority offices (excepting Onchan District Commissioners offices), including the Housing Office, Department of Infrastructure.

Address details:

Department of Infrastructure

Housing Office
Markwell House
Market Street, Douglas
IM1 2RZ
Tel: 685955
Email: housing@gov.im

Braddan Commissioners

Commissioners Office
Close Corran, Union Mills
Braddan
IM4 4LZ
Tel: 852808
Email: braddan@braddan.im

- Any questions in relation to the completion of the form may also be addressed to any of the housing offices above either by post, by telephone, or by prior appointment.

Please read the following notes carefully before completing the application form. Please note that its offence under paragraph 3A of the Housing (miscellaneous provisions) act 1976 to provide a false or misleading statement, which is subject to a £5000 fine and/or 6 months in prison or both.

Housing Application Part 2 – Application Form

Difficulty with forms or just want advice?
The Housing Officer will help in private – just ask

- A. Please make an appointment with a Housing Officer from any of the contacts on page 6 or ask at the relevant town hall or the public counter at Markwell House in Douglas.
- B. If you have difficulty communicating with us in any way, please contact us (or ask a friend or helper to contact us) for alternative arrangements to be made. On request we can provide forms and information in other formats (large print, Audio and Braille). Please call Customer Services on (01624) 685955 or e-mail housing@gov.im

Confidential

Eastern Region

Housing List Application Form

(The Housing Acts 1955 To 1976)

Please read these notes before completing the application form

1. Complete in **block capitals**
2. All questions must be answered.
3. You or your spouse/partner/fiancé(e) must have resided in the Isle of Man for a period of at least ten years, three of which must have been spent in an area where Braddan, Laxey, Lonan and/or the Department of Infrastructure is the housing provider.
4. If you are married your application will be joint, and any tenancy offered will be joint (if both parties have a residency of 10 years which includes at least three years local residency). If you fail to declare a partnership in which you intend to live together then you will knowingly be committing a criminal offence.
5. Your gross income must not exceed £33,000 per annum, (£38,000 if you have one child, £41,000 if you have two children or £44,000 if you have three or more children) and must include income of your spouse, partner or fiancé(e).
6. You should include with this application form any information in support of your application, (such as a Court Order for Possession etc) or provide a written account of your circumstances at section 22.
7. Applications will not be considered from single people under the age of 18. Single applicants accepted onto the waiting list should be aware that it maybe some time before suitable accommodation becomes available.
8. If you are self employed you should note that you will not be permitted to carry out a trade, profession or business from a Public Sector Property without the written approval of the housing provider.

Applicant Details

Please complete in BLOCK CAPITALS	Applicant	Spouse/Partner/Fiancé(e)
1. Full name	Surname	Surname
	First Name(s)	First Name(s)
	Title: Mr / Mrs / Miss / Ms / Other (please specify)	Title: Mr / Mrs / Miss / Ms / Other (please specify)
	Previous name (if applicable):	(First Name) (Surname)
Contact details		
Home Telephone No:		
Mobile No:		
Work No:		
Email Address:		
2. Status (Delete as appropriate)	Single / Married / Widowed / Separated / Divorced / Engaged / Partners	Single / Married / Widowed / Separated / Divorced / Engaged / Partners
3. Current Address		
Date from:		
4. Date of Birth		
5. Place of Birth		
6. No. years resident on island Years Years
Previous addresses		
You should show all addresses and dates that you lived there.	(From To)	(From To)
Please continue on a separate sheet if necessary	(From To)	(From To)
	(From To)	(From To)
7. No. of years resident in the authority area	No of Years	No of Years
8. Occupation		
National Insurance No:	/ / / /	/ / / /

9. Employer (if applicable)					
10. Weekly income at the time of application (you will be required to produce three recent payslips to show your weekly or monthly income or other confirmation as requested. If you are self-employed you will need to show your previous two years audited accounts)					
		Applicant		Spouse/Partner/ Fiancé(e)	
Basic wage		£		£	
Regular overtime		£		£	
All Pensions (incl Supplement)(widows & Widows mother's allowance)		£		£	
Taxable Benefits					
Child Benefit		£		£	
Income Support		£		£	
In receipt of Employed Person's Allowance (not taxable)		Y/N (please circle)		Y/N (please circle)	
Other taxable benefits, (Carers Allowance, Adoption Allowance, Income support etc) <i>If in doubt, put it in</i>		£		£	
Maintenance		£		£	
Other income (please specify)		£		£	
11. Savings					
		Applicant		Spouse/Partner/ Fiancé(e)	
Do you have any savings? (Delete as necessary)		Yes	No	Yes	No
Do you have any assets / savings in excess of £30,000? (Delete as necessary)		Yes	No	Yes	No
This should include the net result of the sale of a previous property whether solely or jointly owned. If 'yes' please forward bank statements and/or disbursements of sale of property.					
Other Persons requiring accommodation					
12. Number of children in the family (pre-school and in full time education).Confirmation of children aged between 18-21 in full time education is required.					
Surname	First name	Age	Date of Birth	Male/Female	Joint Custody Y/N. State %
1.					
2.					
3.					
4.					
5.					

13. Names of any other person requiring housing with you		
Please specify the relationship with the applicant i.e. son / daughter /in employment / relative / lodger etc. (Continue on a separate sheet if necessary)	Full name	Full name
	Relationship	Relationship
Basic wage	£	£
Regular overtime	£	£
All Pensions	£	£
Taxable Benefits	£	£
Other income	£	£

Accommodation required

14. Area in which accommodation is required (please refer to map)

EASTERN REGION	I will live anywhere in the EAST <input type="checkbox"/>	Preferred Eastern Parishes e.g. Braddan, Laxey, Lonan		
	<i>Please tick box if YES</i>	Choice 1	Choice 2	Choice 3

Please note – the Parishes in the Eastern Region are: **Braddan, Laxey and Lonan**. Points will be deducted for unjustified refusal of suitable accommodations within an area selected as first, second or third choice.

If you are prepared to consider housing outside of the EASTERN REGION you may select additional options in parishes outside the East by completing your choice of Parish in the boxes below
[e.g. Marown, Santon ,etc. see white areas of map] You can select a maximum of two Parishes only or ALL ISLAND.

[Parish 1] [Parish 2]

I will live anywhere on the Island *Please tick box if YES*

Type of accommodation required (delete as necessary)	House	Bungalow	Flat
Number of Bedrooms required	One	Two	More than 3
Please state if you have any special needs	Yes		No

Details of present accommodation

15. Do you live in rented accommodation? If no , please go to Question 16	Yes	No		
Is the tenancy in your name?	Yes	No		
If no , give details of your present circumstances (such as living with parents, living with friends etc) Use a separate piece of paper if necessary.				
If yes , please complete the following (delete where applicable):				
The property is a	Flat	Bungalow	House	
The property is	Furnished	Unfurnished	Part	
If a flat, the property is on the	Ground Floor	1st Floor	2 nd Floor	3 rd /4 th Floor
How many bedrooms are there?	1	2	3	Over 3
Do you have central heating?	Yes		No	
Do you have a coal fire?	Yes		No	
Do you have hot water?	Yes		No	
Do you have a bathroom for your sole use?	Yes		No	

Do you have a toilet for your own use?	Yes	No
Do you have a shared toilet?	Yes	No
What is your weekly rent including rates/charges?	£	
Are there any defects in your present accommodation?	Yes	No
If yes, have you requested the owner to rectify?	Yes	No

What are these defects?	
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Please provide details of who owns the property and what action has been taken to rectify the defects, using a separate sheet if necessary	Landlord name and contact details:
	Action taken to rectify defects:

Details of property ownership (if applicable)

16. Do you or your spouse/partner/fiancé(e) own or previously owned a property? (delete where applicable) If no , please go to Question 17	Yes	No
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If yes , is it owned	Solely	Jointly
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Address of property:	Amount of mortgage/ loans outstanding on the property	£
	Value of property	£

Have you or your spouse/partner/fiancé(e) previously owned a property?	Yes	No
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If yes please provide, under separate cover, details of the sale showing the address of the property, name of vendor or vendors, date of sale, net sum after repayment of mortgage, charges or loans.

Special circumstances relating to application

17. Are there any members of your immediate family separated from you because of lack of suitable accommodation?	Yes	No
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If **yes** please give details:

18. Do you or any member of your family suffer from a medical condition or special needs which are affected by your present accommodation or which necessitates a particular type or location of accommodation?	Yes	No
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If **yes**, please ask your Health Professional or Social Worker to complete the form 'Priority for Housing

Need' with you. The Special Housing Needs Self-Assessment form is also available – please ask for more details.		
19. Are you under written Notice to Quit? (State reason for the Notice)	Yes	No
20. Has an application been made to the courts for a Possession Order against you? If yes you must supply a copy of the Possession Order with this application.	Yes	No
21. Have you or your spouse/partner applied to any other housing authority for accommodation?	Yes	No
If yes , what was the outcome of that application?		

Additional Information

22. Please provide any additional information which you think may support your application.

(Continue on a separate sheet if necessary)

Please read the following carefully before signing the declaration.

This form fully completed should be taken to or posted to the addresses shown below. If you are unable to complete the form or provide any necessary enclosure you should seek advice from your housing provider as indicated on page 6. Receipt of this form does not imply acceptance onto the housing waiting list. You will be notified of the decision in writing.

If your application is refused you should write to via the housing provider to the eastern group requesting a review of the decision, which will be determined by the Director of Housing, Department of Infrastructure, Markwell House, Market Street, Douglas, IM1 2RZ. If the decision is upheld upon review, you may then seek an appeal against that decision by lodging such appeal with your grounds for appeal in writing to the Director of Housing within 30 days of the review decision. Your appeal will be heard by an independent Member of the Legislature appointed by the Council of Ministers.

Allocation of properties is undertaken using a points system common to all housing authorities on the island. You will be awarded points based upon your length of residency, time on the waiting list, marital status, and number of children, income and adequacy of your current accommodation. Unjustified refusal of a tenancy and previous accumulative rent arrears may result in deduction of points awarded. You must let us know of any changes of address and significant change in your circumstances immediately as this may affect your point allocation

The housing providers who are working together to deliver the Eastern Region shared list will use the information it obtains from customers for administration in connection with its statutory functions and the provision of any other relevant services to their customers, including marketing, auditing, risk assessment fraud and crime prevention. The information will be shared with all the housing providers responsible for the shared waiting list. The housing providers may share the information concerning the customer with Government departments and agencies only where there is a statutory requirement to do so, and with agents operating under confidentiality agreements. In addition, The housing providers may have to disclose information about the customer to auditors, legal advisers and regulatory bodies.

Subject to the above and unless it has the right or duty to disclose or is permitted or compelled to do so

by law, The housing providers shall not disclose any information about the customer or the company without prior consent of the client or an authorised person. Unless notified by the customer that such information is not required.

The client has a right to see a copy of the records relating to them that the housing providers control and to have any errors corrected. To see a copy of their records the client should apply in writing to the Data protection officer.

Declaration

To the best of my knowledge and belief the information provided in this application is correct and complete. I understand that if any information provided is found to be deliberately or carelessly misleading or false it will prejudice the granting and retention of any tenancy. All the information provided to us must be correct. Misleading or falsified information could result in prosecution and jeopardise any future tenancy. I would draw your attention to the following section of the current Housing (Miscellaneous Provisions) Act 1976 which states:

3A. (1) A person commits an offence if, for the purpose of obtaining the provision of housing under this Schedule, whether for that person or another, that person –

(a) makes a statement or representation knowing it to false; or

(b) produces or furnishes, or knowingly allows to be produced or furnished, any document or information knowing it to be false in a material particular.

(2) A person guilty of an offence under subsection (1) shall be liable on summary conviction to a fine not exceeding £5000 or to custody for a term not exceeding 6 months, or both.

(3) If a person is convicted of an offence under sub-paragraph (1) in connection with housing for himself or herself, the court may, in addition to any other penalty, make an order depriving that person of the estate or interest obtained as a result of the statement or representation or the production or furnishing of the document or information.

I have no objection to the housing providers, to whom this application is made, asking the people or places mentioned on this form for any information which is required to process this application and I consent that the information may be given to the Housing Providers.

Signature of Applicant

Signature of Joint Applicant

I/We authorise the Treasury to disclose particulars of any benefits I/We receive to the Housing Providers.

Signature of Applicant:

Signature of Joint Applicant:

Date of Application:

Housing Application
Part 3 – Income Tax Authorisation

Application no: **HWL**.....

Income Tax Division
2nd Floor, Government Office
Bucks Road
DOUGLAS
IM1 3TX

Housing Waiting List – Income Tax authorisation

To be completed by the applicant(s)

Full name of Applicant

Date of birth

Full name of Spouse/Partner

Date of Birth

Address

.....

Tax reference no

I hereby authorise you to approach the Income Tax Division for verification of my/our income.

Date Signature

Signature

Office use only for Income Tax Division

The above named person has applied for Public Sector Housing and I should be grateful if you would provide me with the relevant details overleaf in respect of the applicants Income Tax status.

Date..... Signature.....

Please return to (housing provider please circle):

Department of Infrastructure
Housing Office
Markwell House
Market Street, Douglas
IM1 2RZ
Tel: 685955
Email: housing@gov.im

Braddan Commissioners
Commissioners Office
Close Corran, Union Mills
Braddan
IM4 4LZ
Tel: 852808
Email: braddan@braddan.im

TAX REF NO NAME (s)

1. Total Gross Income in year ended 5th April 20.....
(including where relevant the gross income of his/her spouse/partner in the above year)

£

Applicant

£

Spouse

2. Date first registered residentially for Tax purposes

Applicant

Spouse

4. ANY OTHER RELEVANT INFORMATION

.....
.....

Income Tax Division:

Date Signature:

EASTERN REGION

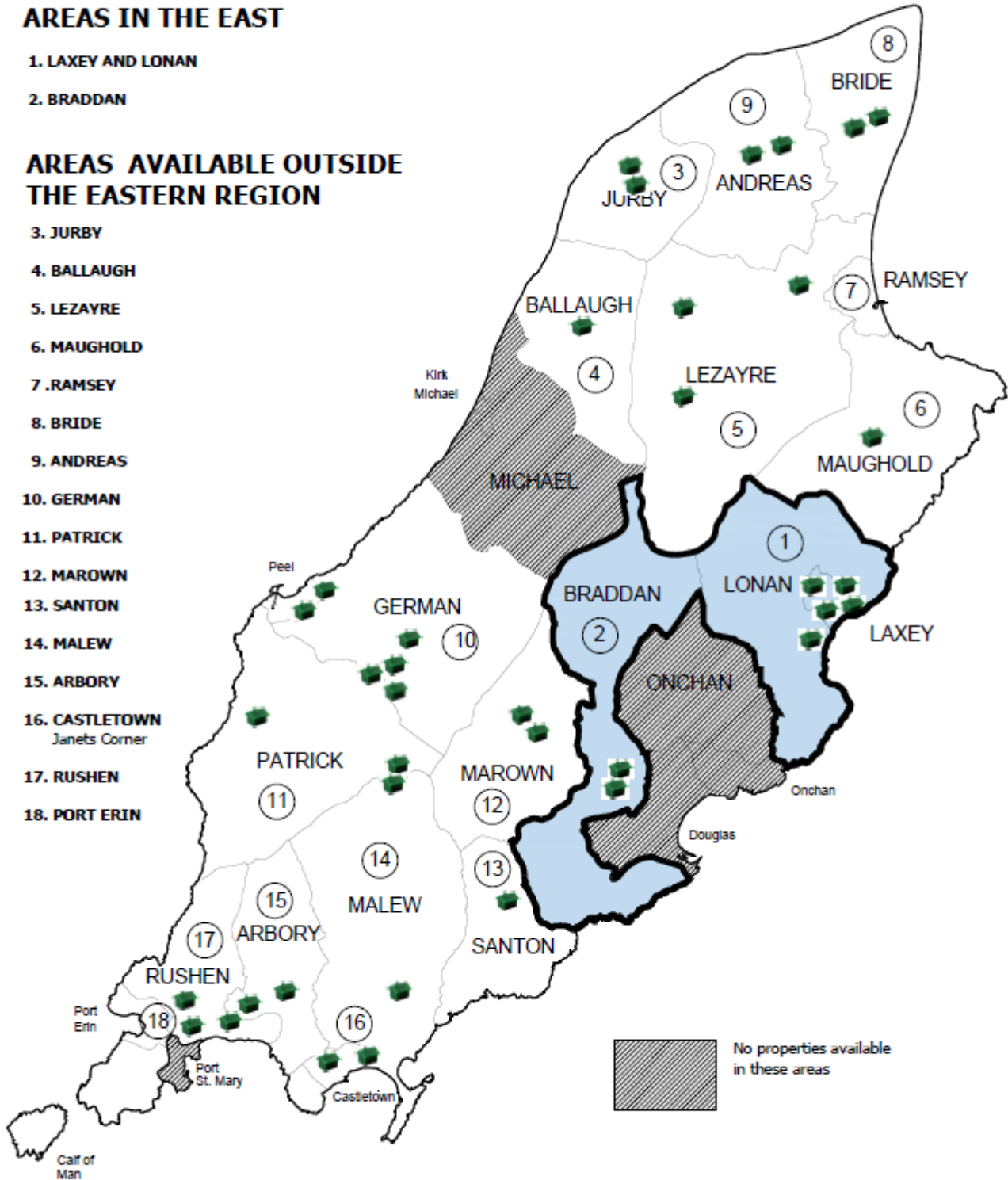


AREAS IN THE EAST

1. LAXEY AND LONAN
2. BRADDAN

AREAS AVAILABLE OUTSIDE THE EASTERN REGION

3. JURBY
4. BALLAUGH
5. LEZAYRE
6. MAUGHOLD
7. RAMSEY
8. BRIDE
9. ANDREAS
10. GERMAN
11. PATRICK
12. MAROWN
13. SANTON
14. MALEW
15. ARBORY
16. CASTLETOWN
Janets Corner
17. RUSHEN
18. PORT ERIN



Housing Application Part 4 – Checklist

Please check that you have completed all the necessary documentation to support your application by ticking in the boxes below.

Please supply original or certified copies of all documents. Wherever possible these items will be photocopied and returned to you while you wait.

	Have you included	<i>Office Use only</i>
1. Evidence of divorce or legal separation (Question 2)	<input type="checkbox"/>	<input type="checkbox"/>
2. Current utilities bill or bank statement, or similar showing your present address (Question 3)	<input type="checkbox"/>	<input type="checkbox"/>
3. Birth Certificates for each person to be housed, including children (Questions 4, 5, 12 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
4. Proof of income (min 3 recent payslips inc. benefits) (Questions 10 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
5. Proof of savings and investments (Questions 11 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
6. Rent book or name & address of landlord (Question 15)	<input type="checkbox"/>	<input type="checkbox"/>
7. Details of ownership/co-ownership of any property (Question 16)	<input type="checkbox"/>	<input type="checkbox"/>
8. Details of previously owned properties (Question 16)	<input type="checkbox"/>	<input type="checkbox"/>
9. Evidence of immediate family living separately (Question 17)	<input type="checkbox"/>	<input type="checkbox"/>
10. Supporting form from a health professional (Question 18)	<input type="checkbox"/>	<input type="checkbox"/>
11. Court Possession Order (Questions 19 & 20)	<input type="checkbox"/>	<input type="checkbox"/>
12. Completed Income Tax authorisation form along with relevant signatures. If joint application both signatures are required. <i>(pages 14& 15)</i>	<input type="checkbox"/>	<input type="checkbox"/>
13. Other evidence/supporting information <i>(please list below)</i>	<input type="checkbox"/>	<input type="checkbox"/>
14. Photographic I.D. for each applicant	<input type="checkbox"/>	<input type="checkbox"/>
15. Full address history, including dates of residence.	<input type="checkbox"/>	<input type="checkbox"/>

Checked By Date:

Acknowledgement Letter sent: Date:

Special Housing Needs Self-Assessment Form or Support for Rehousing form sent please state:

..... Date:

For Office Use Only (Eastern Region)

	Yes	No	Points Allocated
Resident IOM (10 years)			
Area resident (3 years)			
Landlord reference			
Family size (no of Children)			
No under 16			
No aged 16 to 21			
Court Possession Order			
Private Sector Tenant			
Manx Housing Trust			
Environment Health Points			
Health/Welfare Points			
Arrears			
Photo I.D.			
Financial/ Property assets			
Income:			
	Calculations		
Gross Income (single) including Treasury Benefits (excluding Child Benefit)			
Gross Income (couple) including Treasury Benefits (excluding Child Benefits)			
Income Tax check			
Total Points			

Recommendation:	Approve / Refuse
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Reason if Refusal:

Signed: _____ **Date:** _____

Points Deduction/Unjustified Refusal:	Yes / No
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Additional Information. *(Office use only)*

Additional Information

Please take or post this form to any of the following addresses:

Department of Infrastructure

Housing Office
Markwell House
Market Street, Douglas
IM1 2RZ
Tel: 685955
Email: housing@gov.im

Braddan Commissioners

Commissioners Office
Close Corran, Union Mills
Braddan
IM4 4LZ
Tel: 852808
Email: braddan@braddan.im

The information you provide when you complete this application will only be processed for the purpose of dealing with your housing requirements. It may be shared with external partners for the purposes of assessing your eligibility and processing your application. Our Privacy Notice explains how we collect, store and handle your personal data in line with current data protection legislation as applied in the Isle of Man. If you would like to find out more please visit our website at <https://www.gov.im/about-the-government/departments/infrastructure/data-protection/> or contact our Data Protection Officer on 686785 for a paper copy.

This form must be completed by a recognised health/welfare professional who is currently working with the named applicant in a professional capacity. *(Forms should be submitted only where, in the professional opinion of the person completing the form, there are significant and enduring health or welfare issues which will be resolved or considerably improved by alternative housing, and where it is not possible for the applicant to improve their own circumstances e.g. find alternative accommodation – please refer to guidance notes when completing this form)*

Name of Person Submitting		Designation:	
Full Name of Applicant:		Date of Birth:	
Address:		Tel:	
Is the applicant's current address rented or owner-occupied ? <i>(Please circle/delete as appropriate)</i>			
Which Housing Authority Waiting List is the			

Please complete names & contact details of all other health/social welfare professionals who are **currently** involved in supporting the applicant (if known) *(e.g. Health Visitor, Social Worker, O.T., Mental Health professional)*

Name:		Name:		Name:	
Designation:		Designation:		Designation:	
Tel/Contact details:		Tel/Contact details:		Tel/Contact details:	

PROFESSIONAL CONCERNS *(please tick appropriate box (✓) and/or complete as required)*

A CONDITION OF PROPERTY										
1.	Overcrowding		Has Environmental Health been contacted?	Yes		EH Report attached?	Yes			
If Environmental Health have not been contacted please do so <u>before</u> submitting this form (Tel. 685948)										
Has the applicant actively sought alternative accommodation to relieve overcrowding?							Yes		No	
If No what is preventing them from doing so?										
2.	Uninhabitable rooms		Has Environmental Health been contacted?	Yes		EH Report attached?	Yes			
If Environmental Health have not been contacted please do so <u>before</u> submitting this form (Tel. 685948)										
Has the applicant actively sought alternative accommodation?							Yes		No	
If No what is preventing them from doing so?										
3.	Safety concerns		Has Environmental Health been contacted?	Yes		EH Report attached?	Yes			
Brief details:										
B OTHER ISSUES <i>(This may relate to physical health, mobility, personal safety, mental health & wellbeing)</i>										
1.	Asthma		Frequency of inhaler use :			Steroid Use:				
COPD										
Heart Failure										
GP Contact details:										
2.	Access issues due to disability		Has referral been sent to OT?				Yes			
OT assessment carried out?			Yes	OT report attached?			Yes			
3.	Lack of safe play space for children: Brief details:									

4.	Difficulty with access for prams/pushchairs: Brief details:
5.	Other: Brief details:
6.	Please tell us clearly why the current accommodation is unsuitable and how rehousing <u>will resolve or significantly improve</u> the applicant's health or welfare issues. <i>Please be aware that low income is pointed separately by the housing provider so affordability is not within the remit of the health/welfare points available</i>

C. HOUSEHOLD COMPOSITION & DETAILS OF CURRENT PROPERTY

1.	Please provide details of all other people currently living with applicant on a full time basis:			<i>Please tick</i>	
	Name	Relationship to Applicant, if appropriate	Date of Birth	Male	Female
2.	Total number of rooms <u>excluding</u> bathroom and kitchen				
3.	Do family have to share kitchen with non-family members?			YES	NO
4.	Do teenagers have to share room with younger siblings?			YES	NO
5.	Room Usage – e.g. bedroom/living room				
		Room used as (e.g. bedroom/living room):	Room used by:		
	Room 1				
	Room 2				
	Room 3				
	Room 4				
	Room 5				
	Room 6				
	Room 7				

D. SIGNATURE/S OF PROFESSIONAL/S SUBMITTING FORM

Signed: _____ Designation: _____ Date: _____ Contact Tel. _____
 Signed: _____ Designation: _____ Date: _____ Contact Tel. _____

E. APPLICANT CONSENT

I understand that the information given on this form may be shared, in confidence, with other housing authorities and health/welfare agencies with whom the housing authority is working in order to find a property suitable for my needs. I authorise the health/welfare professional/s submitting this form on my behalf to disclose, in confidence, any information relevant to assessing and meeting my housing need.

Signed: _____ Date: _____

Please return direct to the Housing Authority if known, or to Housing Manager, Housing Division, D.O.I., 2ND Floor, Markwell House, Douglas IM1 2SF



The Information in this booklet can be provided in large print or audio tape on request