

Thorngate Living

Resident Application Form – Sheltered Housing

Please answer all questions in full – all information will be treated in confidence.

Complete in black ball point ink and in block capitals – tick the appropriate boxes.

Your details

Applicant: First name
Middle name(s)
Last/family name
Date of birth Email

Partner: First name
Middle name(s)
Last/family name
Date of birth Email

Address
 Postcode

Telephone

Your present accommodation

Owner/occupier Private Tenant Council Tenant Lodger Living with relations Other

Give details of the landlord / description of arrangements

Current rent £ per

Length of stay in years

If less than five years, state your previous address

 Postcode

Do you have a pet? Regrettably, dogs, cats and some other pets are not permitted in our accommodation.
If you wish to bring a pet, check first with our head office.

Your current property

House Bungalow Flat Maisonette Other

No of bedrooms If a flat, what floor is it on?

Details / description

Inside WC Outside WC Bathroom Lift access (if upper floor flat) Stairlift

Central heating Fuel type: Gas Electricity Other Specify if other

Do you share any part of your accommodation (with other people other than your partner)? Yes No

Details

Do you have a house to sell? Yes No

If yes, have you placed it on the market? Yes No

Are you on any other housing waiting lists, e.g. the council housing list? Yes No

If yes, give details

Your current council tax

Local Council

Address

Postcode

Your health and medical circumstances

The Trust has a duty to ensure that accommodation is suitable for you. We must also be certain that all Personal Support Plans take account of health and medical needs in order that we may provide the appropriate type and level of support. In order for the Trust to comply with its legal obligations with regard to the safety, care and support of its residents, it requires details of any long term ailment or disability which may affect independent living.

Applicant: Details of long term ailment or disability

Can you cook, shop, do housework, garden, climb stairs, bath yourself? Yes No

Do you receive any domicillary services, e.g. home carer, cleaner? Yes No

If yes, give details

Are you registered disabled? Yes No

Partner: Details of long term ailment or disability

Can you cook, shop, do housework, garden, climb stairs, bath yourself? Yes No

Do you receive any domicillary services, e.g. home carer, dustbuster? Yes No

If yes, give details

Are you registered disabled? Yes No

Your current work situation

Are you currently working? Yes No

If yes, state number of hours per week

Type of work

Your property and capital details

If you own your present home, what is its approximate value? £

Is there an outstanding mortgage? Yes No If yes, how much? £

Current value of cash savings (bank, P.O., building society, etc) £

Current value of investments (shares, bonds, trusts, property, etc) £

Your current income

Total weekly income (including interest on savings) £

Details

Are you in receipt of housing benefit or council tax rebate? Yes No

Your support

Give information of close relatives or other persons who give you support:

Name Relationship to you

Address
 Postcode

Telephone Email

Name Relationship to you

Address
 Postcode

Telephone Email

Your residence in the area

If you are not resident or have never been resident in Gosport, state your reason for wanting to move to the area

Give reasons for wishing to be housed by the Trust (continue on a separate sheet if necessary)

Where did you hear about us?

Advertisement Marketing leaflet Online search engine Friend / family

GP / social worker Current resident Other

Signature of applicant

To the best of my knowledge and belief the statements made in this application are true and correct.

Signed

Date

We will use your personal information to decide whether to offer you accommodation. We may share your personal information with Gosport Borough Council, Adult Services, your GP and/or the NHS. We will not share your personal information, without your consent, with any other organisation except to help prevent fraud or if required to do so by law. You have the right to request a copy of the personal information we hold about you. If you would like a copy of some or all of this please contact us at: Clare House, Melrose Gardens, Gosport, Hampshire PO12 3BZ.

FOR OFFICE USE ONLY

Received by office date

Signed

Acknowledgement date

Signed

Assessment date

Signed



Clare House, Melrose Gardens, Gosport, Hants PO12 3BZ

023 9253 4999 • info@thorngate.org.uk • thorngate.org.uk

Thorngate Churcher Trust is a charitable company limited by guarantee. Registered in England and Wales company number 9953572.
Registered charity number 1169965. Registered non-profit private provider of social housing number 4839.