

Housing Waiting List

Northern 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 5 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 £33,555 per annum, including that of your spouse, partner or fiancé(e) with no children, £36,375 with one child, £39,185 with two children and £41,990 with three children.
- 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 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 have a partner and intend to live together, your application will be assessed jointly. However, any tenancy offered will only be joint if both parties meet the residential criteria.

Question 3 – Current Address

- You must provide a current utilities bill, bank statement, or similar 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 five 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 prior approval from the Department of Infrastructure or Local Authority (the 'housing providers').

Question 10 – Weekly Income

- Income is based on all gross 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 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.

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 in Question 14. 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 North of the Island (6 Parishes and Ramsey)
 - 2) A specific Parish or Parishes in the North up to 3 choices
 - 3) A choice of 2 parishes outside of the Northern Region
 - 4) Anywhere on the Island

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

For example:

An applicant wishes to be offered a property from anywhere in the northern region.	<ul style="list-style-type: none"> Tick the box " I will live anywhere in the North" only <p>You will then be considered for all 7 Northern locations.</p>
An applicant wishes to be offered a property from anywhere in the northern region but has a preference for where they would like to live.	<ul style="list-style-type: none"> Tick the box " I will live anywhere in the North" Complete Choice 1 through to Choice 3 in order of priority to you. <p>For example – 1st preference: Ramsey, 2nd Maughold, 3rd Bride</p>
An applicant wishes only to be offered a property from a selection of locations of their choosing within the northern region.	<ul style="list-style-type: none"> Do NOT tick the box " I will live anywhere in the North" 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...
An applicant would additionally consider a DOI property outside the northern region.	<ul style="list-style-type: none"> Refer to the map on page 16 for other parishes shown in white (numbered 8-18) and complete the section for Parish 1 or Parish 2 <p>For example – 1st preference: Malew, 2nd Santon etc...</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"

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.
- In the case of recent owner/occupiers, a document provided by the Advocate for the applicant(s) stating the reason(s) for selling, the selling price of the property and proceeds received by the applicant(s) will also need to be submitted.
- 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) may be 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 'Support for Rehousing' 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 legal Notice to Quit or Court Order for possession, 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 in the north, including the Housing Office, Department of Infrastructure.

Address details:

Department of Infrastructure Housing Office Markwell House Market Street Douglas IM1 2RZ Tel: 685955 e-mail: housing@gov.im	Ramsey Town Commissioners Town Hall Ramsey IM8 1RT Tel: 810100 e-mail: housing@rtc.gov.im
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- 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 (telephone: (01624) 685955), or by prior appointment.

Please read the following notes carefully before completing the application form.

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 Ramsey 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. 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

Northern Region

Housing List Application Form

(The Housing Act 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, five of which must have been spent in an area where the Department of Infrastructure or Ramsey Town Commissioners are the housing provider.
4. If you are married or have a partner and intend to live together, your application will be assessed jointly. However, any tenancy offered will only be joint if both parties meet the residential criteria.
5. If you fail to declare a partnership in which you intend to live together then you will knowingly be committing a criminal offence.
6. Your gross income must not exceed £33,555 per annum, (£36,375 if you have one child, £39,185 if you have two children or £41,990 if you have three or more children) and must include income of your spouse, partner or fiancé(e).
7. You should include with this application form any information in support of your application, (such as a Notice to Quit, Court Order for Possession etc) or provide a written account of your circumstances at section 22.
8. 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.
9. 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 prior 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	£	£		
Pensions (widows or retirement)	£	£		
Benefits				
Child Benefit	£	£		
Income Support	£	£		
EPA	£	£		
Other (i.e. DLA)	£	£		
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 £50,000? (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)				
Surname	First name	Age	Date of Birth	Male/Female
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	£	£		

Pension	£	£
Benefits	£	£
Other income	£	£

Accommodation required

Area in which housing is required (please refer to map)

NORTHERN REGION	I will live anywhere in the NORTH <input type="checkbox"/>	Preferred Northern area(s) e.g. Bride, Lezayre, Maughold, Ramsey etc.		
	<i>Please tick box if YES</i>	Choice 1	Choice 2	Choice 3
Please note – the Towns and Parishes in the Northern Region are: Andreas, Bride, Ballaugh, Jurby, Lezayre, Maughold and Ramsey. Points will be deducted for unjustified refusal of a property within an area selected as first, second or third choice.				
If you are prepared to consider housing outside of the NORTHERN REGION you may select additional options in parishes outside the North by completing your choice of Parish in the boxes below [e.g. Laxey, Lonan, German ,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 <i>Please tick box if YES</i> <input type="checkbox"/>				

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

14. 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?				

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:
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Details of property ownership (if applicable)

15. Do you or your spouse/partner/fiancé(e) own a property? (delete where applicable) If no , please go to Question 17	Yes	No
If yes , is it owned	Solely	Jointly
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

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

16. Are there any members of your immediate family separated from you because of lack of suitable accommodation?	Yes	No
If yes please give details:		
17. 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
If yes , please ask your Health Professional or Social Worker to complete the form 'Support for Rehousing' with you. The Special Housing Needs Self-Assessment form is also available – please ask for more details.		
18. Are you under written Notice to Quit?	Yes	No
19. Has an application been made to the courts for a Possession Order against you? If yes you must supply a copy of the Notice to Quit or Possession Order with this application.	Yes	No

20. Have you or your spouse/partner applied to any other housing authority for accommodation?	Yes	No
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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 northern 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 Northern 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 regulatory bodies and Tynwald members.

Housing Application Part 3 – Income Tax Authorisation

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 Commissioner. The housing provider may charge a fee of up to £10 for such access.

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

Date of Application

Please provide photographic identification for each applicant requiring housing.

Acceptable forms of identification are:
Passport, Current Driving Licence, Current Employment I.D

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 and any Income Tax liabilities I/we may have. I also hereby authorise you to approach the Income Tax Division for verification that my / our Income Tax Returns are up to date and the date that I/we became resident for Tax purposes.

Date Signature

Signature

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.....

Office use only for Income Tax Division: Please return to (housing provider please circle):

<p>Department of Infrastructure Housing Office Markwell House Market Street Douglas IM1 2RZ Tel: 685955 e-mail: housing@gov.im</p>	<p>Ramsey Town Commissioners Town Hall Parliament Square Ramsey IM8 1RT Tel: 810100 e-mail: housing@rtc.gov.im</p>
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TAX REF NO NAME (s)

1. OUTSTANDING BALANCES
Income Tax Liability

Amount Owing

- 1. Assessment no.....20 / 20..... £
- 2. Assessment no.....20 / 20..... £
- 3. Assessment no.....20 / 20..... £
- 4. Assessment no.....20 / 20..... £

Class 4 Liability

- 1. Assessment no.....20 / 20..... £
- 2. Assessment no.....20 / 20..... £
- 3. Assessment no.....20 / 20..... £
- 4. Assessment no.....20 / 20..... £

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

£

Applicant

£

Spouse

3. Date first registered residentially for Tax purposes

Applicant

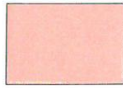
Spouse

4. ANY OTHER RELEVANT INFORMATION

.....
.....

Income Tax Division Date Signature:

NORTHERN REGION

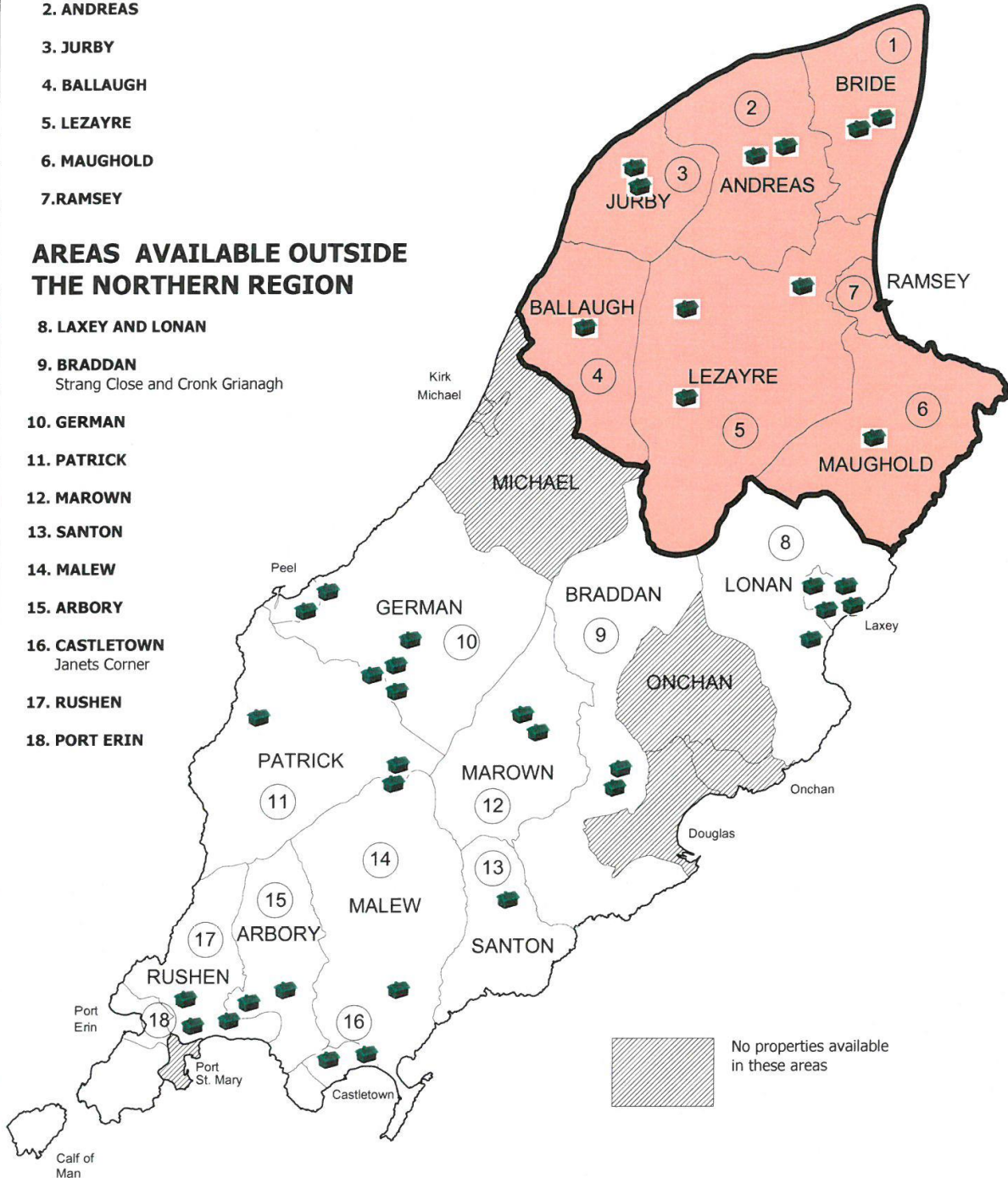


AREAS IN THE NORTH

1. BRIDE
2. ANDREAS
3. JURBY
4. BALLAUGH
5. LEZAYRE
6. MAUGHOLD
7. RAMSEY

AREAS AVAILABLE OUTSIDE THE NORTHERN REGION

8. LAXEY AND LONAN
9. BRADDAN
Strang Close and Cronk Grianagh
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. Marriage Certificate (Question 2)	<input type="checkbox"/>	<input type="checkbox"/>
2. Evidence of divorce or legal separation (Question 2)	<input type="checkbox"/>	<input type="checkbox"/>
3. Current utilities bill or bank statement, or similar showing your present address (Question 3)	<input type="checkbox"/>	<input type="checkbox"/>
4. Birth Certificates for each person to be housed, including children (Questions 4, 5, 12 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
5. Proof of income (min 3 recent payslips inc. benefits) (Questions 10 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
6. Proof of savings and investments (Questions 11 & 13)	<input type="checkbox"/>	<input type="checkbox"/>
7. Rent book or name & address of landlord (Question 15)	<input type="checkbox"/>	<input type="checkbox"/>
8. Details of ownership/co-ownership of any property (Question 16)	<input type="checkbox"/>	<input type="checkbox"/>
9. Details of previously owned properties (Question 16)	<input type="checkbox"/>	<input type="checkbox"/>
10. Evidence of immediate family living separately (Question 17)	<input type="checkbox"/>	<input type="checkbox"/>
11. Supporting form from a health professional (Question 18)	<input type="checkbox"/>	<input type="checkbox"/>
12. Notice to Quit or Court Possession Order (Questions 19 & 20)	<input type="checkbox"/>	<input type="checkbox"/>
13. 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"/>
14. Other evidence/supporting information <i>(please list below)</i>	<input type="checkbox"/>	<input type="checkbox"/>
15. Photographic I.D. for each applicant	<input type="checkbox"/>	<input type="checkbox"/>
16. 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 (Northern Region)

	Yes	No	Points Allocated
Area Resident			
Resident IOM			
Born IOM			
Income			
Joint/Single			
Family			
Notice to Quit			
Health/Welfare/ Environment			
Arrears			
Emergency			
Other			
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)*



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