**HOUSING INTEREST FORM**

**Please complete and return if you have a strong connection with**

**………………………….**

Name: ………………………………………………………………………………………..

Address: ………………………………………………………………………………..........

…………………………………………………………………………………………………

Tel. No. : ………………………………: Email : ……….……………………………………

Are you on the Council’s Housing Register: Yes/No

If yes, what is your application number (if known): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, you will need to complete an application form to join the Housing Register if you wish to be considered for a rented property.

## Family Details

Number of adults in family requiring accommodation: ……........ (+ ages): ......................

Number of boys: ………. (+ ages): …………………………………..

Number of girls: ………. (+ ages): …………………………………..

Number of bedrooms required: ……………………………………………..

## Local Connection

This scheme is being developed to meet the local housing need in ……………, therefore you will need to demonstrate that you have a local connection with the Parish. You will be considered to have a local connection if you or a member of your household: (please tick all those that apply)

( ) Currently lives in the Parish of ……………..... and has been resident there for ....... years

( ) Has lived in the Parish of ………….......... previously and were resident for ........ years

( ) Is employed in the Parish of …………………... and have been so for ........ years

( ) Has immediate family living in the Parish of ……............ who have been resident for ....... years

## Tenure

There will be a mix of both rented and shared ownership properties on the new affordable housing scheme. Please indicate which tenure of property you would like to be considered for:

**Rented: Shared Ownership:**

PTO

Please also complete the financial information below:

|  |  |
| --- | --- |
| **Income Details** | |
| APPLICANT 1  Income from Employment:  £  State weekly/fortnightly/monthly  (after tax)  Annual Gross Salary:  £ | APPLICANT 2  Income from Employment:  £  State weekly/fortnightly/monthly (after tax)  Annual Gross Salary:  £ |
| **Savings Details for Shared Ownership interests** | |
| Savings  £  State amount and type: | Savings  £  State amount and type |
| Please also indicate any value of pledges of support from any relatives (this should include capital sums which you know you will benefit from in the next 12 months) | Please also indicate any value of pledges of support from any relatives (this should include capital sums which you know you will benefit from in the next 12 months) |

## Other Details

Any other details you would like to be considered: ………….……………………............................

………………………………………………………………………………………….............................

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**Please note:** To provide the relevant Local Authority with a clear understanding of the Local Housing Need, Hastoe will pass on your contact details, your local connection criteria and whether you are interested in a Rented or Shared Ownership property. All other information will remain private and confidential to Hastoe.

Signed: …………………………………………… Date: …………………………