

Homeseekers' Register Application

1. Details of applicant/s and others who will live with you in your new home

Surname	First Name	Date of Birth	Relationship to main applicant	Gross Income (including Benefits)	Total savings/ Investments
			SELF		

2. Employment Details

Applicant 1 name and address of employer _____

No of years in this employment

Applicant 2 (if applicable), name and address of employer_____

No of years in this employment_____

3. Applicant/s current address and details of present accommodation

Applicant 1 address:	Applicant 2 address (if different to applicant 1):	
Postcode:	Postcode:	
Tel: Home - Mobile -	Tel: Home - Mobile -	
Email:	Email:	
Tenure of above (please circle) Owner renting lodger shared ownership	Tenure of above (please circle) Owner renting lodger shared ownership	
Rent, Mortgage or Board paid each *week/month (*delete where appropriate) £	Rent, Mortgage or Board paid each *week/month (*delete where appropriate) £	
How long have you lived there?	How long have you lived there?	

4. Details of previous accommodation

Have you ever owned a property? If yes please provide details below.

Property address	Date Bought	Date sold	Equity?
5. Ability to purchaseHave you enquired about a mortgage? (pleas	e circle)	Yes 1	No
Details of mortgage lender			
What is the maximum you can borrow?		£	
If you have not declared any savings/investme intend to pay your deposit, legal fees and Sta			
Do you have a property to sell? (Please circle)		No
What is the current market value of your prop	erty?	£	
How much is the outstanding mortgage on this property? £			
If there is anyone else entitled to a share of th	ne equity, please give	e details below:	
6. Your housing requirements What type of accommodation are you looking	for? (please tick, yo	u can select mor	e than 1).
House Ground floor flat	Maisonett	е	
Bungalow Upstairs flat	Other (ple	ase specify)	
 Please state minimum and maximum r 	number of bedrooms	s you require?	Min Max

8. If you secure a property through the low cost housing scheme will you use this property as your main and only home; that is you will live there for no less than ten months of any one year (please circle)?

Yes No

- 9. Is anyone in your household registered disabled? Yes No (go to question 10)
- 10. Do you/they receive any benefits in relation to this disability eg DLA Yes No (Please ensure you have included details of any benefits in section 1.)
- 11. Would you be interested in purchasing a property on a shared ownership basis under the Government's new 'HomeBuy' scheme? Yes No

12. Location

Which areas/developments do you want to be considered for low cost home ownership?

One of the qualifying criteria for affordable housing schemes in Eden District is that people will need to demonstrate a local connection to the area (please refer to enclosed 'Local Connection Criteria' form) if you have stated above that you would like to be considered for a particular area or development please explain the reason(s) why.

13. Please provide any other information you think would be useful in support of your application.

14. Declaration

Please read this statement carefully ticking the boxes on the left to indicate you have read and understood each statement and then sign in the box below.



This is my/our claim for Low Cost Home Ownership.



I/we declare that the information I/we have given on this form is correct and complete to the best of my knowledge.

I/we authorise Eden District Council's Housing Services section to make any enquiries to verify the information on this form.

I/we authorise the Council to share the information I/we have given with other agencies including local developers (this will not include income/financial information).

I/we understand that if the information I/we have given is incorrect or incomplete or fail to report any changes which might affect my/our application for low cost housing the council may take legal action against me/us.

Name (please print)		
Signature	Date:	
Name (please print		
Signature	Date:	

Data Protection Act 1998

The information provided on this form will be used to process your application to join the **Homeseekers' Register**, which is administered through Eden District Council. This information may be checked with other information held by Eden District Council and may be used to prevent and detect fraud.

(For office use only)

Date Reg/No _____ Name(s) _____ Parishes/Wards_____

Total Funds £_____

DATE	COMMENTS	INITIALS