

Applicants from outside Northern Ireland

SELF - ASSESSMENT FORM

Important Note - Please Read:

As you are living outside Northern Ireland and we will not be able to visit you in your home, we need to know some more details about you than you will be providing on the basic application form. This information will allow us to make sure that all your circumstances are properly considered.

Please complete *both* forms, the Application/Transfer Form *and* this Self-Assessment form, and return them to the address indicated below:

Please Return To:

For Office Use Only

Reference Number

*Date of Application
(Date Received Stamp)*

Application Type

Application Type ✓
Application
Local Authority Tenant
Housing Association Tenant

SECTION 1 PERSONAL DETAILS

Please complete your name and address

1. Applicant / Joint Applicant

Name:
Current Address:
Postcode:
Telephone No:

2. Employment Details / Income

If you or your partner are working, please complete the following:

	Employers Name & Address
Name:	
Name:	

3. Benefits

Are you or your partner receiving state benefit(s)?

Yes No

If YES, please give details of the type of benefit(s) below:

Applicant / Tenant / Partner	Details of Benefit(s)

4. Relative of Employee

Are you, or any member of your household a close relative* of an employee of the Northern Ireland Housing Executive or a housing association in N.Ireland?

Yes No

If YES, please give details:

**Close relative is defined as husband / wife / partner / son / daughter / foster child / brother / sister / step brother / step sister / son in law / daughter in law / father / mother / mother in law / father in law / step son / step daughter / step parents / sister in law / brother in law / uncle / aunt / nephew / niece / grandparent / grandson / granddaughter.*

SECTION 2 ELIGIBILITY

We need the following information to help decide if you and your partner are eligible for social housing in Northern Ireland

5. Age Requirements

If you are under 18 years of age, please complete the following questions. If you are 18 years of age or older, please go to question 6.

Are you currently living outside the family home? Yes No

If **YES**, please tell us who are you living with and what is their relationship to you:

Are you known to Social Services? Yes No

Have you a dependent child or children, or expecting a child? Yes No

Are you married with no children? Yes No

Have you a specific offer of training, full-time education or employment in Northern Ireland? Yes No

If **YES**, please give details below and attach copies of correspondence you have received with your application.

6. Connection With Northern Ireland Requirements

Have you, or any member of your household, ever lived in Northern Ireland? Yes No

Have you any connection with Northern Ireland? Yes No

** Connection includes such matters as your normal residence, employment or employment prospects, family associations or other special circumstances.*

If you have answered **YES** to either or both the above questions, please provide details below:

SECTION 3 YOUR PRESENT HOME DETAILS

7. Please tick the description that best describes your current housing tenure.

	Tenure	✓
1	An owner occupier/buying his/her own home	
2	A tenant in furnished accommodation(Private Sector)	
3	A tenant in unfurnished accommodation (Private Sector)	
4	A sub tenant in furnished accommodation(Private Sector)	
5	A sub tenant in unfurnished accommodation (Private Sector)	
6	A lodger	
7	A Housing Executive tenant	
8	Sharing Housing Executive accommodation	
9	Sharing other rented accommodation	
10	Sharing with an owner occupier or someone who is buying their home	
11	Living in Board and Lodgings (B&B) or in a private hotel	
12	Living in a hostel	
13	Living in residential accommodation (e.g. Nurse’s Home)	
14	A child in Care	
15	Living in a Caravan	
16	A prisoner	
17	A hospital patient	
18	A traveller	
19	An illegal occupant	
20	A housing association tenant	
21	An Applicant from outside N. Ireland applying under the HOMES Scheme	
22	No fixed abode	
23	Other - please specify	

How many bedrooms are there in your current property?

Does your current property have more than one living room or a separate dining room ?

Yes

No

What type of property (e.g. house, flat) is it?

8. Mutual Exchange

Are you interested in obtaining accommodation by exchanging your current home with another person in Northern Ireland?

Yes

No

If **Yes** please complete the following details:

Type of housing you would consider:

1 st Area of interest	2 nd Area of interest
<input type="text"/>	<input type="text"/>

9. Current Landlord Details

The following question is for current tenants of a Local Authority or Registered Housing Association only. If you are not a current tenant please go to question 10.

Please provide name and address and telephone details for your landlord:

Name of Landlord:	<input type="text"/>
Address:	<input type="text"/>
Telephone Number:	<input type="text"/>

SECTION 4 YOUR CURRENT HOUSING CONDITIONS

10. SHARING

Are you sharing the property with anyone who is not to be re-housed with you?

Yes

No

If **YES**, please complete the following questions. If **NO**, please go to question 11.

Do you share a living room with anyone who is not to be re-housed with you?

Yes

No

Do you have a separate living room in the property?

Yes

No

Do you share a kitchen?

Yes No

Do you share a w.c.?

Yes No

Do you share a Bathroom?

Yes No

11. Overcrowding

How many double bedrooms (100 + square feet / 9.3+ square metres) are in your property?

How many single bedrooms (40 to 100 square feet / 3.7 to 9.3 square metres) are in your property?

Please give details of anyone who lives in the property who is **NOT** to be re-housed with you.

Name	Relationship (if any)	Age
1.		
2.		
3.		
4.		
5.		

12. LACK OF AMENITIES AND DISREPAIR

Please describe any general defect in the fabric or structure of the dwelling e.g. excessive dampness, serious disrepair etc.

Is there a satisfactory supply of mains water to your kitchen?

Yes No

If there is a kitchen does it contain...?

SECTION 6 YOUR HOUSING CHOICES

14. We want to know what sort of accommodation you need. Certain types of accommodation may only be suited to certain applicants. For example, severely disabled applicants require ground floor accommodation.

If YOU need special accommodation because for example, of your age, disability or ill health. Please indicate what type.

Warden Assisted/Sheltered housing*	<input type="checkbox"/>	Ground floor accommodation	<input type="checkbox"/>
Wheelchair facilities	<input type="checkbox"/>	Other – please specify	<input type="text"/>

**Sheltered accommodation provides independent living with supervision through a Warden with a range of communal facilities available for social purposes.*

How many bedrooms do you need?

Please note, while your preference may be as stated above, the number of bedrooms assessed as being required to house you, may be different.

15. On your application form you indicated one or two areas where you would like to live. In addition to these areas you will be considered for accommodation, (generally in adjacent areas), in the wider "Common Landlord Area" in which your preferred estates/projects are located. If you wish you may widen your choices further by requesting to be considered for any vacancies arising in the relevant General Housing Area which, usually, includes a number of Common Landlord Areas including the one in which your preferred estate/project(s) is/are located.

If you wish to be considered for the General Housing Areas please put a tick (Ö) in the box below.

General Housing Area Yes

More information on this can be obtained from the relevant local N.I.H.E. District Office or housing association office.

SECTION 7 OTHER DETAILS / CRITICAL DATES

16. Future Events

Are you, or any member of your household, getting married? Yes No

If YES, enter Date

Are you, or any member of your household expecting a child? Yes No

If **YES** enter Date

Are you, or any member of your household being hospitalised, or discharged from hospital / prison or other institution? **Yes** **No**

If **YES** enter Date

17. Does your name, or that of any member of your household, appear on another application / transfer form for re-housing in Northern Ireland? **Yes** **No**

If **YES**, please list the details below, and note that the person may only appear on **one** form.

Name of Person	Name and address of the other application / transfer case	Reference No If known

SECTION 8 OTHER HOUSING OPTIONS

18. LATENT DEMAND

Are there any rural areas with little or no Executive/housing association where you would be prepared to accept if accommodation were built there? **Yes** **No**

If **YES** give details

1 ST PREFERENCE	2 ND PREFERENCE

19. OTHER TENURES

Are you interested in any other tenure, please answer the following questions?

i) Garage

Are you interested in renting a garage from either the Housing Executive or housing association(s) **Yes** **No**

If you have answered YES, you should contact the relevant Housing Executive or housing association office for further information, please note, however, that we do not have garages in every area.

ii) Renting From Private Landlord

Are you interested in renting from a private landlord? **Yes** **No**

iii) Purchasing Own Home

SECTION 10 DECLARATION

Release of Information on other Tenures

If you have expressed an interest in tenures other than social housing, the Executive may provide details of your name and address to those housing associations, estate agents and / or providers of private housing who may be able to assist you further.

Do you wish this information to be released? **Yes** **No**

I/We confirm that the information supplied is correct.

Signed : Applicant

Date

Signed : Joint Applicant

Date