Shetland Islands Council

APPLICATION FORM FOR HOUSING IN SHETLAND

Hjaltland Housing Association

SIC stamp

HHA stamp

Please complete this joint SIC and HHA application form for Housing in Shetland in BLOCK CAPITALS and return it to either:

- **Shetland Islands Council—Housing Service, 8 North Ness Business Park, Lerwick, Shetland ZE1 0LZ, or**
- **Hjaltland Housing Association, 6 North Ness Business Park, Lerwick, Shetland ZE1 0LZ**

Guidance on completing the form is given within the Important Information section on appropriate pages. IF YOU REQUIRE ANY HELP IN COMPLETING THE FORM, PLEASE CONTACT EITHER SIC HOUSING ON 01595 744360 OR HOUSING@SHETLAND.GOV.UK, OR HJALTLAND ON 01595 694986 OR MAIL@HJALTLAND.ORG. INFORMATION CAN BE MADE AVAILABLE IN LARGE PRINT OR ON COLOURED PAPER. TRANSLATIONS MAY BE AVAILABLE ON REQUEST.
All information is treated in the strictest confidence and is protected under the Data Protection Act 2018.
We will process the data included in the form in accordance with our Privacy Statements which are available from the internet links below:
www.shetland.gov.uk/downloads/file/308/housing-application-and-allocation
Hjaltland Housing Association Privacy Notice for Tenants & Applicants

SECTION 1 YOUR PRESENT HOUSING ARRANGEMENTS

(a) MAIN APPLICANT **Date of Birth**

Title (e.g. Mr etc)

Forename(s)

Surname

Previous Surname

Address

Postcode

Address for correspondence if different from above

Postcode

Telephone (Home)

Telephone (Mobile)

Telephone (Work)

E-mail

Please state preferred contact method i.e. Letter or Email

(b) JOINT APPLICANT **Date of Birth**

Relationship to main applicant

Title (e.g. Mr etc)

Forename(s)

Surname

Previous Surname

Address

Postcode

Address for correspondence if different from above

Postcode

Telephone (Home)

Telephone (Mobile)

Telephone (Work)

E-mail

Please state preferred contact method i.e. Letter or Email

IMPORTANT INFORMATION

If you are applying jointly with another person, please fill in the other Person's details here.

Please note if you are applying jointly with another person/s for SIC Housing, any applicants who are applying from **different addresses** must fill in **separate** application forms.

If you change address you must complete a new form with the details of that address. If any other circumstances alter, please contact us to inform us as this may affect the number of points you are awarded in relation to your housing need.

Please note proof of residency at address will be required, i.e. credit card statement, council tax bill, TV licence or catalogue statement.

(c) YOUR CURRENT ACCOMMODATION

(1) Why are you applying for Social Rented Housing?

(2) Please tick appropriate box

Institution i.e. in prison			
Hospital or care Setting		You are renting a Council house	
Staying with Family or Friends		You are renting a Housing Association house	
You own your own house		Tied let	
Living with Ex-Partner		Foster or residential care	
A Privately Rented House		Do not have anywhere to stay	
Lodger/Sublet		Shared Ownership	
SIC temporary accommodation		Other (please specify below)	

(3) What type of accommodation do you live in at present?

House — with stairs		Mobile Home/Caravan	
House — without stairs		Hostel	
Flat — (please specify which floor)		Other (please specify below)	

(4) Is your property sub-standard/lacking any essential amenities?

You may be eligible for points if your property is below tolerable standard. This includes if the property:

- Is structurally unstable,
- does not have adequate access,
- does not have piped water,
- does not have cooking facilities.
- has significant rising/penetrating damp,
- does not have a fixed sink, bath or toilet fitted within the property,
- does not have effective drainage of foul or surface water, or

Other qualifiers could be single glazing, draughts, dampness etc.

Please use the box below to describe any issues like this with your property:

IMPORTANT INFORMATION

Further writing space is available on pages 13-14.

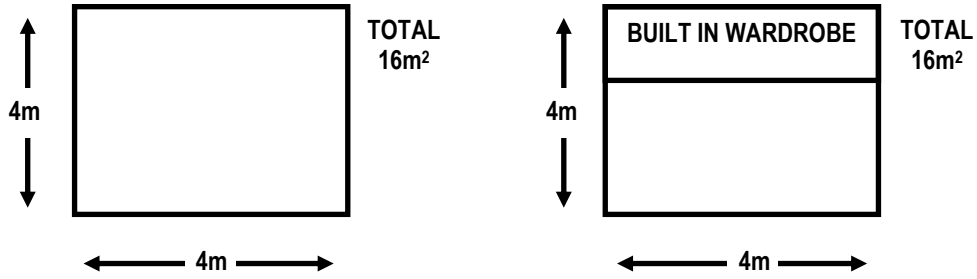
If you are currently a tenant of any landlord, we will request a report on your tenancy from your landlord.

We may refer you to Environmental Health for advice on your rights or arrange for a property survey to be carried out to assess the standard of your property.

Information on how to deal with dampness and condensation in the home can be found here: www.shetland.gov.uk/tenant-information/household-advice/3

(5) What are the measurements of the bedroom(s) in your accommodation? Do not measure your kitchen, bathroom and living room.

FOR EXAMPLE:



THESE MEASUREMENTS ARE ESSENTIAL FOR CALCULATING OVERCROWDING/UNDER OCCUPANCY POINTS
You can measure in feet (ft) or metres (m) but please state which you have used.

	1	2	3	4	5	6
Size of Room						

(6) Please circle the total number of bedrooms in the property you currently stay in:

According to policy, a single bedroom measures more than 70ft² or 6.5m², but less than 110ft² or 10.22m² (a double bedroom is above these measurements).

- **The floor space in built in wardrobes /cupboards, etc will be taken into account in calculating the useable floor area of your rooms.**
- **The floor space under a combe ceiling with the height of 5 feet or less will not be taken into account in calculating the useable floor area of your rooms.**

SINGLE 1 2 3 4 5 6

DOUBLE 1 2 3 4 5 6

BEDSIT ☐ **A bedsit is a property where there is no separate bedroom. Do you live in a bedsit? Please tick if this applies to you.**

IMPORTANT INFORMATION

Please put in approximate measurements if you do not have a tape measure. It is important that this information is included as it may affect your points. Your house is overcrowded if you do not have all the rooms that you need.

It is important that you provide this information, as it is needed in order to calculate your points level in relation to housing need.

We require the total number of bedrooms in the whole property.

(7) Do you pay rent? YES ☐ NO ☐

If **YES** how much do you pay? ☐ Weekly ☐ Monthly ☐

If you pay to live in a property, a contract exists, even if there is no written agreement. Further checks are needed on rights to remain/how to end the tenancy. If no payment is being made there may be no right to reside.

(8) Are you in arrears with your rent or mortgage? YES ☐ NO ☐

(9) If yes, do you have an agreed payment arrangement? YES ☐ NO ☐ N/A ☐

IMPORTANT INFORMATION

Please note this will be checked with your landlord or mortgage lender. For financial advice, contact: www.shetlandcab.org.uk

(d) WHO LIVES WITH YOU NOW, AND WHO WILL MOVE IN WITH YOU?

Please give the names of all the people who live with you, children who visit under child contact arrangements (any contact you have with children who do not normally stay with you), and those who do not currently live with you but will when you move. Please note this is in relation to the main applicant, joint applicant details should also be listed below.

The Housing Application and Allocation Privacy Statement outlines how your personal data provided in this form will be used to process your application. If information is provided in this form about anyone else, it is your responsibility to inform them that their details have been provided as part of this application. Information on how your personal data, along with anyone else's personal data can be found in the privacy statement at www.shetland.gov.uk/downloads/download/33/register-of-privacy-notices.

Forename(s)	Surname	Relationship to you	Date of Birth	Male or Female	Do they live with you now (yes/no)	Will they be rehoused with you?	Child contact if relevant (yes/no)

If you have contact with your children who do not live with you permanently although may stay over on a regular basis, please tick the box to request a Child Contact form from SIC or Hjaltland or download from here: www.shetland.gov.uk/downloads/download/271/additional-forms-pdf-downloads. ☐

(e) PREGNANCY

Are you, or anyone who will be housed with you pregnant? If so, please provide the details below. YES ☐ NO ☐

Forename(s)	Surname	Date baby is due

PLEASE NOTIFY APPROPRIATE LANDLORD(S) WHEN BABY IS BORN

IMPORTANT INFORMATION

Please provide a copy of a MAT B1, scan photo or letter from your doctor.

(f) SHARING YOUR ACCOMMODATION

(1) Do you share any of the following with anyone who will NOT be moving with you? N/A ☐

	Yes	No		Yes	No
Living room	☐	☐	Kitchen	☐	☐
Bedroom	☐	☐	Bathroom	☐	☐
Toilet	☐	☐			

(2) Do you have to share your bedroom with anyone other than your partner? YES ☐ NO ☐

(3) Do you have any pets or livestock that will be moving with you? If yes please specify YES ☐ NO ☐

Please see both SIC and Hjaltland Allocation policies

(g) HOUSING HISTORY

(1) When did you move into your current address? Date of Entry / /

(2) What is your landlord's (if renting), name and address? If you live in a Shared Owership house, please state both your address and your landlord's.

Name of landlord

Address of landlord

Postcode

Your name

Shared Owner-ship address

Phone number/ email address

Postcode

(3) Please provide all addresses over the past 3 years for all applicants below. If you have never lived at another address please input your current address as a record for a previous address.

Name of person/s holding tenancy

Type of tenancy Local Authority Housing Association Private Rented Other

E.g. Parental Home

Previous Address

Postcode

Name of previous landlord

Address of previous landlord

Phone number/email address

Start Date End Date

Postcode

Name of person/s holding tenancy

Type of tenancy Local Authority Housing Association Private Rented Other

E.g. Parental Home

Previous Address

Postcode

Name of previous landlord

Address of previous landlord

Phone number/email address

Start Date End Date

Postcode

Name of person/s holding tenancy

Type of tenancy Local Authority Housing Association Private Rented Other

E.g. Parental Home

Previous Address

Postcode

Name of previous landlord

Address of previous landlord

Phone number/email address

Start Date End Date

Postcode

IMPORTANT INFORMATION

Please note as with page 2, if you are currently a tenant of any landlord, we will request a report on your tenancy from your landlord, and for former tenancies from any previous landlords.

Please note the 'Start Date' is the date you moved into a property and the 'End Date' is when you left.

There is extra space on pages 13-14 if you require.

If private renting, your landlord should be Registered. Further Information is available here: www.shetland.gov.uk/housing-options/private-sector-housing/2?documen-tId=187&categoryId=20090

(h) LEAVING YOUR CURRENT ACCOMMODATION

(1) What is your main reason for wanting to move from your present accommodation?

Please tick all that apply.

Asked to leave accommodation/Notice to Quit		Property in poor condition	
Financial reasons		No fixed abode	
To move to a larger property		To move to a smaller property	
To look for work		To take up work	
To be closer to work		To move to another area	
Neighbourhood problems		Relationship breakdown	
Leaving Armed Forces		Social/Medical reasons	
To provide support to a relative (see page 7)		To receive support from a relative (see page 7)	
To be near a relative (please specify below)		At risk of domestic abuse	
Tied accommodation		Independence	
Essential / emergency worker to be nearer employment		Incoming Worker	
Living with parents		Temporary Accommodation (Homeless)	
Mutual Exchange		Other (please specify below)	

(2) Are you or a member of your household experiencing harassment or abuse from a partner or ex partner? YES ☐ NO ☐

(3) Are you or a member of your household experiencing harassment or abuse from another household member? YES ☐ NO ☐

(4) Are you or a member of your household experiencing harassment or abuse from a neighbour or member of the community? YES ☐ NO ☐

(5) If you have been asked to leave your current accommodation or received Notice to Quit, by what date are you expected to leave? N/A ☐

Day ☐ Month ☐ Year ☐

Please provide evidence e.g. a copy of Notice to Quit/letter from landlord with your application.

(6) Do you have a written tenancy agreement? YES ☐ NO ☐

Please provide evidence e.g. a copy of a lease with your application if you are in private or temporary accommodation.

IMPORTANT INFORMATION

Both SIC and Hjaltland award points for insecurity of tenure. For SIC, points will not be awarded until you have provided a copy of the lease for your tenancy and a copy of the Notice to Quit. For Hjaltland, you will be awarded initial points before providing proof at which point you may then be awarded further points.

If you are a council or housing association tenant and would be interested in a house exchange, please go to: www.homeswapper.co.uk or find further information at: www.shetland.gov.uk/housing

Points linked to Harassment may be awarded in consultation with support services on production of evidence. www.safershetland.com/

Please give further details on pages 13-14.

If you currently own your own home but it is being sold, points will not be awarded until your solicitor has provided confirmation of a date of entry of the new owners.

SECTION 2 MEDICAL, SUPPORT AND SOCIAL NEEDS

IMPORTANT INFORMATION

(a) MEDICAL NEED

(1) Do you or anyone else in your household have a medical or mental health condition or disability which makes your current accommodation unmanageable? YES ☐ NO ☐

A separate medical form will be sent out for you to complete so that points can be awarded, or you can download from www.shetland.gov.uk/downloads/download/271/additional-forms-pdf-downloads. These will be assessed and awarded by the Medical Points Panel . This group will meet and make a decision on the level of points awarded in respect of your medical condition and any special requirements or adaptations. This assessment process is confidential to SIC Housing, HHA and Occupational Therapy. If you have already completed a medical points form, please let us know when this was done.

(b) SUPPORT

DATE

(1) Do you need Sheltered Housing? YES ☐ NO ☐

SIC Sheltered Housing provides a Community Housing Support Worker service to provide housing support to tenants. There is Sheltered Housing in many areas throughout Shetland, please see details on page 8. HHA provide a registered housing support service for HHA tenants.

A Sheltered assessment will be carried out before you will be considered for sheltered housing or a housing support service.

(2) Do you need Very Sheltered Housing? SIC Only YES ☐ NO ☐

Very Sheltered Housing for example Brucehall Terrace in Uyeasound and King Erik House and Annsbrae in Lerwick offer on site care and support plus 24 hour on call provision.

An up to date Understanding You will be required to determine eligibility for Very Sheltered/ Supported Living accommodation.

(3) Do you need Supported Living Housing? YES ☐ NO ☐

To provide support to adults over the age of 18 years with Learning Disabilities, Autistic Spectrum Conditions and/or complex needs in their own homes and in the community.

(4) Do you have a current 'Understanding You' assessment? YES ☐ NO ☐

An Understanding You is part of the assessment used through the With You For You process.

For HHA only Support points are awarded if you require General or Special Needs Accommodation to receive/provide support of family, friends or social support groups.

(5) Are you moving to another area to give or receive support? YES ☐ NO ☐

Social Needs Points may be awarded from SIC and Support points from Hjaltland where you are moving to another area to give or receive support. These points will apply in cases where support is given to vulnerable individuals, e.g. disabled and elderly people and people with mental health problems. Please note an assessment will be required.

Give Support ☐ **Receive Support** ☐

The question below is applicable for SIC Housing only.

(c) SOCIAL NEEDS POINTS

(1) Do you feel you would be eligible for Social Needs points? YES ☐ NO ☐

If yes, a Social Needs form will be sent to you if you are applying for SIC Housing which will assist us in making an assessment. You can also download a Social Needs form from here:

www.shetland.gov.uk/downloads/download/271/additional-forms-pdf-downloads

Criteria at which SIC Social Needs points can be awarded are below:

- **Child or Adult Protection concerns** – for example, where children have been victims of abuse; where children are vulnerable and at risk because of their housing situation and/or location.
- **Severe personal relationship difficulties**—this would include domestic abuse, applicants who have been referred to MARAC.
- Where it is recognised settled accommodation will **reduce risk of offending** as part of a Criminal Justice support plan.
- Where an individual is in an **inappropriate care setting** – this will include delayed discharge from hospital or an inappropriate placement in residential care, Supported Living and Outreach, or Annsbrae.
- Where you or a member of your household is the subject of persistent and ongoing racial, sexual or other forms of **harassment** and where we are satisfied that there is evidence of such harassment. Confirmation may be sought from the Police, Social Work, NHS or other agency as appropriate.
- Where you have to move to another area to **give or receive support** and all of your areas of choice for housing are closer to the person giving or receiving the support than your current home. These points will apply in cases where support is given to vulnerable individuals, (e.g. disabled, elderly, people with mental health problems) and this support will significantly benefit the individual receiving the support. This does not include child minding unless there are exceptional circumstances.

SECTION 3 YOUR FUTURE HOUSING NEEDS—AREAS OF CHOICE

(a) IN WHICH AREAS WOULD YOU LIKE TO BE REHOUSED?

You should only choose areas where you would accept accommodation if an offer is made. Please choose carefully as if you are offered and unreasonably refuse a property in an area of your choice, your housig application may be suspended for 6 months.

Where would you like to be rehoused? Please tick	Areas of Choice—Where our properties are (as at March 2024)	Bedsit/ 1 Bed		2 Bed		3 Bed		4&4+Bed		Total		Overall Total
		SIC	HHA	SIC	HHA	SIC	HHA	SIC	HHA	SIC	HHA	SIC & HHA
	Central											
☐	Weisdale*	5	-	8	-	14	7	-	-	27	7	34
☐	Whiteness	-	-	1	-	2	-	-	-	3	-	3
☐	Tingwall	5	31	1	27	-	18	-	2	6	79	85
☐	Scalloway*	26	57	17	34	33	16	3	8	79	85	164
☐	Burra - Hamnavoe*	4	-	1	8	3	5	-	-	8	13	21
☐	Burra - Bridge End*	5	-	2	-	2	-	-	-	9	-	9
	Lerwick & Bressay											
☐	Lerwick*	302	243	372	103	178	44	23	20	876	410	1287
☐	Bressay*	8	3	13	2	10	-	-	-	31	5	36
	North											
☐	North Roe*	4	-	2	-	2	3	-	-	8	3	11
☐	Eshaness	0	0	0	0	0	2	0	0	0	2	2
☐	Hillswick*	3	7	2	-	1	7	-	-	6	14	20
☐	Urafirth*	4	-	4	-	4	-	-	-	12	-	12
☐	Ollaberry	4	-	-	-	10	-	-	-	14	-	14
☐	Sullom	-	-	-	3	-	7	-	-	-	10	10
☐	Mossbank*	3	-	5	-	35	-	3	-	46	-	46
☐	Firth	8	-	2	-	83	-	1	-	94	-	94
☐	Brae	8	4	13	1	66	10	2	0	89	15	105
☐	Vidlin*	7	-	2	-	4	-	-	-	13	-	13
☐	Voe*	7	-	3	-	4	-	1	-	15	-	15
☐	South Nesting*	4	-	5	-	6	-	1	-	16	-	16
	North Isles											
☐	Fetlar*	6	-	2	-	5	-	-	-	13	-	13
☐	Unst - Haroldswick*	3	-	2	-	8	-	-	-	13	-	13
☐	Unst - Baltasound*	5	-	4	-	16	16	1	-	26	16	42
☐	Unst - Uyeasound*	8	-	3	-	6	-	-	-	17	-	17
☐	Yell - Cullivoe*	5	-	3	2	7	4	-	-	15	6	21
☐	Yell - Mid Yell*	6	-	15	-	5	-	-	-	26	-	26
☐	Yell - Burravoe*	7	-	5	-	5	-	-	-	17	-	17
	South											
☐	Cunningsburgh*	11	-	12	5	10	-	1	-	34	5	39
☐	Gulberwick	-	4	-	6	-	10	-	-	-	20	20
☐	Sandwick*	19	-	16	16	17	22	1	-	53	38	91
☐	Bigton*	4	-	2	-	1	-	-	-	7	-	7
☐	Boddam	2	-	-	3	10	3	1	-	13	6	19
☐	Virkie*	10	-	1	11	12	19	-	-	23	30	53
☐	Fair Isle*	1	-	1	-	-	-	-	-	2	-	2
	West											
☐	Aith	6	-	3	12	11	4	-	-	20	16	36
☐	Bixter	-	4	1	-	12	-	1	-	14	4	18
☐	Sandness	5	-	4	2	1	4	-	-	10	6	16
☐	Skeld	7	-	3	-	3	-	-	-	13	-	13
☐	Tresta	-	-	-	-	2	-	-	-	2	-	2
☐	Walls	13	-	2	8	7	-	-	-	22	8	30
	Whalsay & Skerries											
☐	Skerries	1	-	-	-	1	-	-	-	2		2
☐	Whalsay – Brough	10	-	-	-	12	-	-	-	22	-	22
☐	Whalsay - Symbister	4	6	4	5	10	2	-	-	18	13	31

IMPORTANT INFORMATION

SIC and HHA have separate Allocation policies. This means that there are different rules for how they assess housing applications. For an explanation of the policies, please refer to the individual Allocation policy leaflets. You can see the full documents at www.shetland.gov.uk/housing and www.hjaltland.org.uk.

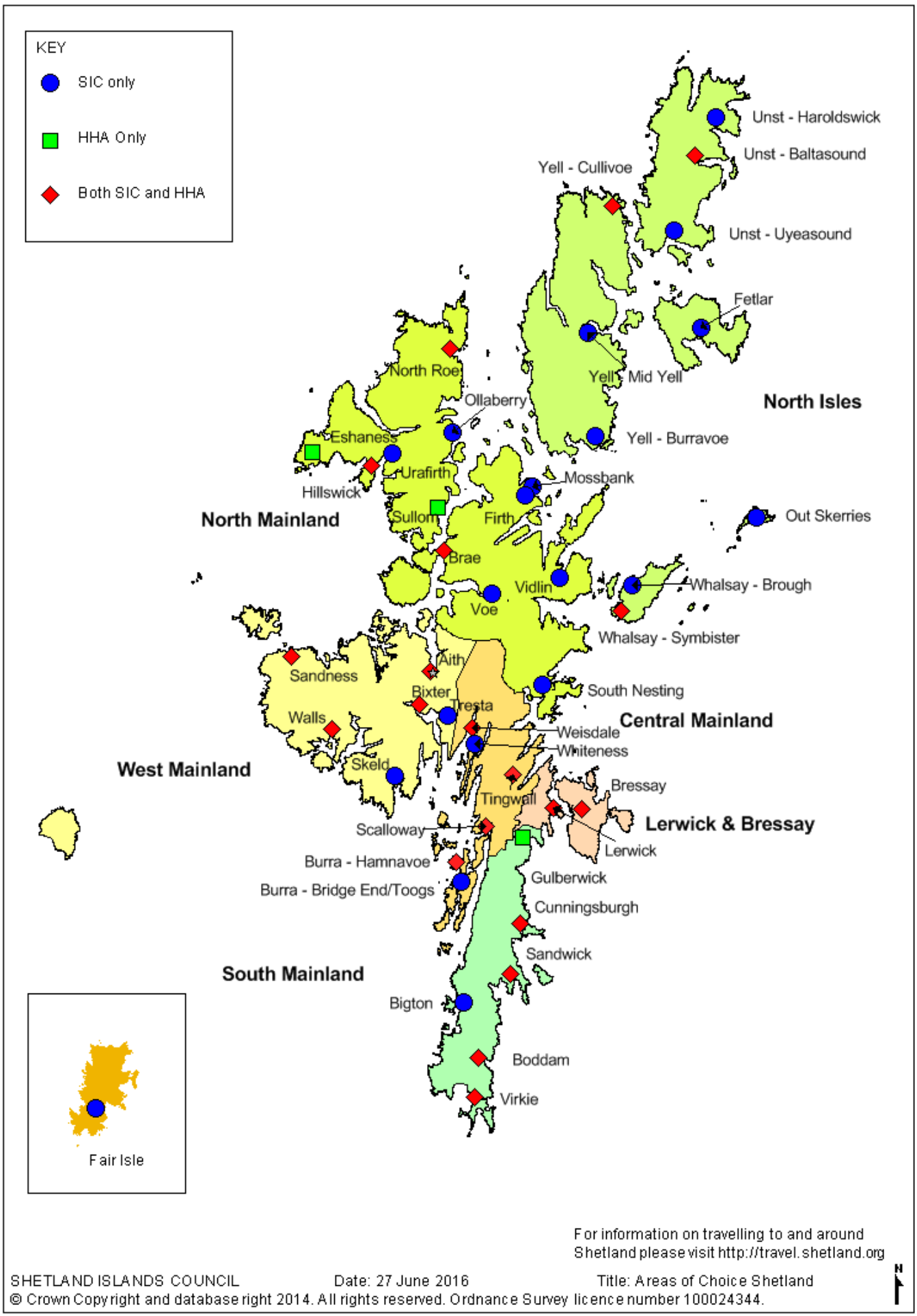
For clarification about any of the housing stock, or advice on the level of lettings in a particular area, please contact either SIC or Hjaltland, or check the websites.

These figures included all rented stock, including Temporary Accommodation. Please note those areas with asterisks (*) contain Sheltered or Very Sheltered Housing.

(b) WHICH IS YOUR PREFERRED AREA OF CHOICE?

Please note this is for statistical purposes only.

AREAS OF CHOICE MAP



SECTION 4 YOUR WORK

(a) EMPLOYMENT

(1) Please specify below the current states of employment for both main and joint applicants:

	Main	Joint		Main	Joint
Employed			Self Employed		
Student			Unemployed		
Other (please specify below)			Retired		

Please complete the details below if you are employed or are a student (main applicant):

Job Title/ Employer

Address of Employer

Postcode

Place of Work

Name of College or University

Course Title

Please complete the boxes below for years spent in your present job or at University/College on your course.

YEARS **MONTHS**

If the application is in joint names, please fill in the joint applicant's details below:

Job Title/ Employer

Address of Employer

Postcode

Place of Work

Name of College or University

Course Title

Please complete the boxes below for years spent in your present job or at University/College on your course.

YEARS **MONTHS**

(2) What is your National Insurance number?

Main Applicant

Joint Applicant

IMPORTANT INFORMATION

If you are unemployed and are receiving benefits, please tick **Unemployed** and **Other** then write in the box below to tell us about the benefits.

If you are looking for work, please enclose a copy of a letter indicating an expression of interest or offer of employment (see checklist on page 12).

If you are a student please fill out the name and address of the College/University you attend. Please fill out your course title in the job title box, and what year you are in on your course.

Please note that answering this question is **OPTIONAL** and will not affect your application in any way.

SECTION 5 LEGAL MATTERS AND DECLARATION

IMPORTANT INFORMATION

(a) LEGAL MATTERS

	Main Applicant		Joint Applicant	
Are you related to an SIC or HHA employee?	YES ☐	NO ☐	YES ☐	NO ☐
Are you related to a local Councillor or HHA committee member?	YES ☐	NO ☐	YES ☐	NO ☐

If you have answered YES to any of the questions above, please provide details below:

Under the *Housing (Scotland) Act 2001* and the *Asylum and Immigration Act 1999*, we have to confirm whether you qualify for public assistance including housing.

(1)

	Main Applicant		Joint Applicant	
• Are you a United Kingdom citizen?	YES ☐	NO ☐	YES ☐	NO ☐

If you have answered 'no' the above question, you must complete the following questions.

• Are you under immigration control?	YES ☐	NO ☐	YES ☐	NO ☐
•Are there any conditions or limits to your leave to remain (permission to stay) in the United Kingdom?	YES ☐	NO ☐	YES ☐	NO ☐
•Do you have any restrictions on your status that prevents you from accessing public funds?	YES ☐	NO ☐	YES ☐	NO ☐

Council housing is regarded as a form of public assistance. Therefore, if you are not eligible for public assistance, the council will be limited in terms of the assistance it can offer. These restrictions do not apply in the same way to housing associations therefore your application will be registered and assessed on your individual circumstances by Hjaltland Housing Association. All information in your application is held securely and only made available to those with a need to know.

Proof of rights to public assistance must be provided before the application will be accepted onto the waiting list or at the point of allocation, eg Passport, Official documentation, worker registration scheme care, and worker registration scheme certificate, proof of self employment status, EEA registration certificate, worker authorisation document/card. The passport may also contain information on eligibility for benefits. If the passport is stamped to indicate that access to public funds are not available, then that person is not eligible for housing assistance.

(2) Do you, or anybody you are applying with, have to register with the police under the Sex Offenders Act 1997 or Sexual Offences Act 2003? YES ☐ NO ☐

(3) Has anyone ever taken court action against you, or a person you are applying with, for antisocial behaviour? YES ☐ NO ☐

If yes please provide brief details, or if you prefer, please discuss this in confidence with a member of SIC or Hjaltland staff.

Proof of rights to public assistance must be provided before any offer of accommodation will be made, eg a passport or documentation showing *Right to remain* conditions.

(b) CHECKLIST

Please use the checklist below if applicable to ensure you have provided copies of information required for your application. This will help prevent any delay in your form being processed.. If you have just moved house, please contact HHA or SIC.

Page	Confirmation of:	Examples	
1	Proof of residency at address	Credit card statement, council tax bill, TV licence or catalogue statement	
4	Pregnancy	Mat B1, scan photo or letter from doctor	
6	Confirmation of date of entry if selling property	Letter from Solicitor	
6	Notice to Quit	Notice to Quit form or letter from landlord	
7	Medical Condition or Disability	Completed Medical Points Form	
7	Social Needs points	Completed Social Needs form	
10	Offer of Employment in Shetland	Letter or email of Offer of Employment	
11	Rights to public assistance	Passport or documentation showing Right to remain conditions	
12	Power of Attorney/ Guardianship	Copy of signed Power of Attorney/Guardianship document	

If you would like to be considered by both landlords, then please leave the boxes below blank. If you wish to be housed by one landlord only please tick the appropriate box:

I/we only want to be housed by SIC ☐ **I/we only want to be housed by HHA** ☐

(c) DECLARATION

I/we confirm that to the best of my/our knowledge, the details I/we have entered on this application form are true and accurate. I/we understand that if my/our circumstances change, I/we must immediately notify Shetland Islands Council and/ or Hjaltland Housing Association in writing. I/we understand that if I/we have given false information or withheld any relevant information, my/our application or any offer of accommodation may be suspended from the housing list for a period of up to 6 months (for SIC applications), and for Hjaltland this would affect any offer of housing I am/we are made.

I/we understand that if I/we gain a tenancy using false or incomplete information then the relevant landlord can end the tenancy and repossess the property.

I have included all the proofs that are requested in this form.

The information provided by you is processed in accordance with the Data Protection Act 2018 to allow us to effectively process your Housing application and make contact with former and current landlords. The Data Protection Act 2018 gives you the right to know how we will use your data. Further information about how we use your personal data is available from Hjaltland Housing Association or the Council's website at www.shetland.gov.uk/managing-information/privacy-data-protection.

Please see SIC Housing's Privacy Statement and HHA's Privacy Notice via the links below:
www.shetland.gov.uk/downloads/file/308/housing-application-and-allocation
Hjaltland Housing Association Privacy Notice for Tenants & Applicants

I/we have read and understood the declaration above and the Privacy Statements.

☐ *Please tick this box to agree to terms and conditions.

Signature (if more than one applicant, both applicants must sign).

Signature **Date**

Signature of joint applicant **Date**

If signing on behalf of the Applicant/s and you have Power of Attorney/Financial/Welfare Guardianship, please sign below:

Please enclose a copy of Power of Attorney/Guardianship with application.

Signature **Date**

IMPORTANT INFORMATION

If you are not able to provide a copy, please bring the original document/s to the SIC or HHA office and copies will be made which will be used for your application.

Please use pages 13-14 (overleaf) to provide us with any further information you feel that will help towards your application.

*Terms and Conditions are everything that is included in the housing application process.

Please note that if this application form is not ticked at Declaration and signed on receipt at SIC or HHA, it will be returned to the Applicant/s for completion. This may delay your application being processed.

ADDITIONAL INFORMATION

If you wish, you may use this section to provide us with any additional information regarding your application for housing and your housing need, e.g. previous address/es over the past 3 years (see page 5).

(g) HOUSING HISTORY

Name of person/s holding tenancy

Type of tenancy **Local Authority** **Housing Association** **Private Rented** **Other**

E.g. Parental Home

Previous Address **Name of previous landlord**

Address of previous landlord

Postcode **Phone number/email address**

Start Date **End Date** **Postcode**

Name of person/s holding tenancy

Type of tenancy **Local Authority** **Housing Association** **Private Rented** **Other**

E.g. Parental Home

Previous Address **Name of previous landlord**

Address of previous landlord

Postcode **Phone number/email address**

Start Date **End Date** **Postcode**

FURTHER INFORMATION

Please use this page and the back page overleaf to provide any further information you think may be of relevance to your application.

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Please use this page to provide any further information you think may be of relevance to your application.