

66 Christchurch Road.

Please return to:



PRESENTATION HOUSING ASSOCIATION

11/12 LION YARD • TREMADOC ROAD • CLAPHAM • LONDON SW4 7NQ

Telephone: 071-498 6544 Facsimile: 071-498 6449

HOUSING/TRANSFER APPLICATION FORM

About you: the Applicant(s)

1. Full names of all applicants (block capitals)

Mr Mrs Miss Ms

MOUSEFOOT ZACHARIAS 29 30/04/66
Surname Forename(s) Age Date of Birth

Mr Mrs Miss Ms

Surname Forename(s) Age Date of Birth

Present Address

Newman Mansions 2-4 Newman Square
SW15 9AD Covent Garden London

Telephone Number _____ Home _____ Work _____ Ot _____

2. Please list all the people who will be living with you.

Surname	Forename(s)	Date of Birth	Relationship to you	Address if different from yours

3. Are you or is anyone living with you pregnant? Yes No When is the baby due? _____

4. As an equal opportunities organisation, Presentation Housing Association wants to ensure that all its applicants for housing and internal transfers are considered regardless of race, creed, colour, sex, sexual orientation, marital status, age or disability. To enable us to do this, and for that reason only, please answer the following in both parts.

I/We would describe the ethnic origin of my/our household as: (please tick only one box from each part)

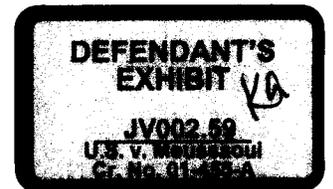
Part I Asian Caribbean African S.E. Asian British/European Irish Other Question refused

Part II Black White Other Mixed

My/Our household's first language is French

5. Who is your next of kin?

Name _____ Relationship to you _____



6. Do you have a doctor or social worker whose name and address you can give us?

Yes No

Name Haniif Mohammed
Address Supporting Housing
officer, 277 Newcom
Square, Newcom Hamman
SUS - Tel 0413 202016

Do you have central heating?

None Full Partial

Can you use a garden?

Sole use of back garden
 Partial (shared or communal use) of back garden
 No access to back garden

7. Are you or your partner related to anyone who is, or has been in the last 12 months, a member of PHA's staff or Committee?

Yes No

If yes, please give details _____

10. Are you: Tenant Lodger Owner Occupier

Other

Who is your present landlord?

Name Englisch Church
Address 277 Newcom Square
SUS 2nd Floor Council Court

8. Do you have any pets?

Yes No

If yes, please give details _____

What rent do you pay? £ _____ per week/month

56,50 £

11. What is your main reason for requesting housing/transfer?

The hostel will close
next in 1989

I have been in this hostel
more than a year and
it is a short stay hostel

I'm doing some study
and the facilities
it is not really ~~proper~~
adequate for study

I want to live alone

About Your Present Housing

9. Do you live in:

Bedsit Flat Maisonette
 House Bungalow Caravan
 Hostel Room Hotel Other

How many rooms are there? 90

Do you have your own: Yes

lathroom Yes No If no, who do you share with? 12 people
WC Yes No

12. Have you been given notice to quit?

Yes No If so, when do you have to leave?

How long have you been at your present address?

~~over~~ 13 months

Where did you live before?

St Mark's house
255 old Marlborough Road
London NW1 4ST

How long did you live there?

~ 5 months

Why did you leave?

It was a short stay
hostel (not more than 3
months usually)

Are you on a Council Waiting List or transfer list?

Yes No If Yes which one(s)?

Are you on a Housing Association Waiting List?

Yes No If Yes, which one(s)?

About Your Income

13. Are you employed?

Yes No If Yes, your place of employment

Is your partner employed?

Yes No If Yes, your partner's place of employment

What is the total weekly income of your household?

£ 88 fortnightly

14. Do you receive any state benefits?

Yes No If Yes, which ones

15. Do you have any furniture?

Yes No

Do you have savings to buy furniture?

Yes No

but I will

About Your Health

16. Do you or any of those who live with you suffer from any illness or disability which will affect the type of housing you need?

Yes No

If yes, give details

(If you are applying for a transfer, please provide a Doctors letter or medical evidence)

What kind of housing would you like?

17. How many bedrooms do you require? 2

18. Do you have any special requirements? (please note PHA has only limited accommodation with access to garden or central heating)

Access to a garden

Necessary Preferred Not necessary
(ie essential)

Low floor or lift

Necessary Preferred Not necessary
(ie essential)

Central Heating

Necessary Preferred Not necessary
(ie essential)

Other (please state)

19. In which area do you wish to live?

- | | |
|----------------|-----------------------------|
| 1. Lambeth | 2. Elephant & Castle |
| 3. Westminster | 4. Near Elephant and Castle |

Which area(s) would you not consider?

- | | |
|-----------------|-------------------------------|
| 1. Gars Beatson | 2. Far from Elephant & Castle |
| 3. | 4. |

Are you able/willing to decorate?

Yes No

20. Other information

Please state any further information you wish to give in support of your application.

I really need a self accommodation because of my study and also it's

21. Declaration and Signature(s)

As far as I/we know the answers I/we have given on this form are true. I/We understand that to give false information could result in my/our losing a tenancy granted by Presentation Housing Association.

A. Aloushadi
Signature (applicant)

Signature (joint applicant)

22/04/03
Date