

HOUSING INTEREST FORM

Please complete and return if you have a strong connection with

.........

Name:			
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)			
() Cui	rrently lives in the Parish of and has been resident there for years		
() Has) Has lived in the Parish of previously and were resident for years		
() Is e) Is employed in the Parish of and have been so for years		
() Has	s 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		



If you wish to be considered for shared ownership properties it is essential that you are registered with the Help To Buy scheme. For further information and to register please visit www.helptobuyese.org.uk

Please also complete the financial information below:

Income	Details		
APPLICANT 1	APPLICANT 2		
Income from Employment:	Income from Employment: £		
State weekly/fortnightly/monthly (after tax)	State weekly/fortnightly/monthly (after tax)		
Annual Gross Salary:	Annual Gross Salary: £		
Savings Details for Shared Ownership interests			
Savings	Savings		
£	£		
State amount and type:	State amount and type	3	
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)		
		y .	
Other Details Any other details you would like to be considered:			
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:		

Please return this form to: Hastoe Housing Association, Rectory Farm Barns, Little Chesterford,