



ISSUED BY

OFFICE

Application for Housing

Application form



AUGUST 2021

Housing Application Checklist for Verification

Prior to accepting your Search Housing Application Form, it is paramount that the following documentation is provided.

Tick each box where the relevant up to date documentation has been provided.

PLEASE DO NOT SEND IN YOUR ORIGINAL DOCUMENTS AND IF YOU ARE HAVING PROBLEMS WITH PROVIDING THESE DOCUMENTS, CONTACT THE HOUSING REGISTER TEAM TO DISCUSS ON 01563 554821.

| Identification Documents <i>Please note that just one of the documents below is required</i> | |
|---|--------------------------|
| UK/EU Passport | <input type="checkbox"/> |
| UKBA documentation with full security features, including photo & visa showing endorsements that determine right to apply for housing in the UK | <input type="checkbox"/> |
| UK Birth Certificate | <input type="checkbox"/> |
| Marriage Certificate | <input type="checkbox"/> |
| Photo-card Driving Licence/Photo-card provisional licence | <input type="checkbox"/> |
| Current Benefits Agency letter | <input type="checkbox"/> |
| Blue Disable Drivers Pass / Travel Card | <input type="checkbox"/> |
| DWP letter (e.g. Income Support, Jobseeker's Allowance, Universal Credit Letter) | <input type="checkbox"/> |
| HM Revenue & Customs (Inland Revenue) tax document – must have name and address | <input type="checkbox"/> |

| Proof of Residence <i>Please note that just one of the documents below is required</i> | |
|--|--------------------------|
| Utility bills – e.g. gas, electricity, land line telephone, water <i>(mobiles telephone bills are not accepted)</i> | <input type="checkbox"/> |
| Current Council Tax Bill | <input type="checkbox"/> |
| Electoral register confirmation | <input type="checkbox"/> |

| | |
|--|--------------------------|
| DWP letter (e.g. Income Support, Jobseeker's Allowance, Universal Credit Letter) | <input type="checkbox"/> |
| HR Revenue & Customs letters (e.g. Tax Credit, Child Benefit, Income Tax) | <input type="checkbox"/> |
| Tenancy Agreement | <input type="checkbox"/> |
| Bank/Building Society statement | <input type="checkbox"/> |
| Confirmation from current employer | <input type="checkbox"/> |

| Proof of ID & Residence for all members being rehoused on the Application <i>Please note that just one of the documents below is required</i> | |
|---|--------------------------|
| Full birth certificate for each person | <input type="checkbox"/> |
| Or Child Benefit or Tax Credits Letter (must be in the main or joint applicants name) | <input type="checkbox"/> |

| If you have stated on your application form that you are living no fixed abode can you please provide one of the following - | |
|---|--------------------------|
| DWP letter (e.g. Income Support, Jobseeker's Allowance, Universal Credit Letter) | <input type="checkbox"/> |
| HR Revenue & Customs letters (e.g. Tax Credit, Child Benefit, Income Tax) | <input type="checkbox"/> |
| Bank/Building Society/Post Office accounts statement | <input type="checkbox"/> |

Guidance Notes

Please ensure you read and understand the following information before completing the Housing application.

What you should do:

- Please complete all sections within the form. Please answer every question as fully as you can to help us assess your housing need correctly. If you cannot answer a question please type N/A (not applicable) or 'do not know' in the space provided.
- If you are homeless and have nowhere to stay, or if you have a home but you cannot stay there then get in touch with your local Council. Even if you are not yet homeless, but you will have to leave where you are living in the next two months, you should still contact your local Council for advice.

What we will do with your information/ personal data:

- SEARCH is a partnership involving East Ayrshire Council and Registered Social Landlords, Atrium Homes, Cunninghame Housing Association, Riverside Scotland and Shire Housing Association.
- We will use the information you provide to SEARCH to process your application for housing. The information will be shared with the SEARCH partners.
- We may contact others to get more information to help us process your application. This may include:
 - Your current or previous landlords
 - Police
 - Medical and Health professionals
 - Others with relevant information.

This information will be used to assess your application in accordance with the Allocation Policy of the partner landlords and match your requirements and preferences against available properties.

The information will also be used for statistical and monitoring purposes.

We will not disclose your personal data beyond the SEARCH partners except where required to do so to process your application or as required by law.

Before completing this form please read through the following statements and sign at the bottom to show that you understand and agree with them.

I understand:

- That you may process my/our personal data as in the aforementioned statement, including contacting my/our current/previous landlords, my/our doctor; hospital consultant, health visitor; social worker; police, probation officer or any other relevant person if more information is needed in connection with my/our housing application.
- That failure to provide information within this form could result in delay to the processing of your application or ultimately result in us being unable to process your form.
- That the Council can share my/our personal data with other social housing providers if I/we are nominated for housing through the Council's Nomination Agreements.

I agree:

- That by ticking 'I agree' and by inserting my/our name(s) in the space provided, I/we agree to the aforementioned statement.
- That I/we will submit the application by email to confirm I/we are the main/joint applicant.
- That I/we may receive an email from the Council acknowledging my/our application.
- That if I/we are providing information about someone else, that they are aware of the aforementioned statement.
- That I/we will inform SEARCH of any change in my/our circumstances.
- That all information given by me/us to SEARCH is true and accurate.
(Applicants who provide false information will be suspended from the housing list for a period of 6 months)
- That if I/we are given a tenancy because I/we have supplied false information or I/we have held back any information that the landlord will take action to end the tenancy.
- If I/we accept a property offered through SEARCH including mutual exchange, and nomination to other social housing providers that my/our application will be cancelled and that I/we will have to submit a fresh application of I/we wish to move again.

By checking this box, I/we agree to signing and submitting this application electronically

Applicant's Signature

Date:

Joint Applicant's Signature

Date:

Please note that if the declaration is not completed then we will not process this application

Please read carefully and answer all of the questions within the application even if you think they do not apply to you including: **Section 4: Immigration Control & Non UK Nationals**, **Section 5: Supervision Order**, **Section 6: Anti Social Behaviour**

Section I: Information about the household member(s) applying for housing

i Advice to applicants – Please give the address where you currently stay. If you have no permanent address then you should provide a correspondence address where you are able to collect any mail which will be sent to you. A correspondence address can also be used if you do not want any mail to be sent to your home address.

| | |
|-------------------------------|--|
| Name of main applicant | |
| Date of birth | |
| Current address | |
| Telephone number(s) | |
| E-mail address | |
| Marital Status | |
| National Insurance Number | |
| First Language | |
| Nationality | |

| | |
|---|--|
| Do you require the services of an Interpreter? <i>If yes, please provide details</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |

| | |
|--|--|
| Correspondence address if different from above or if you have no permanent address | |
| | |

| | |
|--------------------------------|--|
| Name of joint applicant | |
| Date of birth | |
| Current address | |
| Telephone number(s) | |
| E-mail address | |
| Marital Status | |
| National Insurance Number | |
| First Language | |
| Nationality | |

| | |
|---|--|
| Do you require the services of an Interpreter? <i>If yes, please provide details</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |

| | |
|--|--|
| Correspondence address if different from above or if you have no permanent address | |
| | |

Section 2: Known by any other name

| | |
|---|---|
| <p>Have you or any joint applicant ever been known by any other name? <i>If yes, please provide details</i></p> | <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> |
|---|---|

| Main Applicant | | Joint Applicant | |
|----------------|-------|-----------------|-------|
| Names | Dates | Names | Dates |
| | | | |
| | | | |
| | | | |

Section 3: Your Family

i Please give details of EVERYONE living in your current accommodation. You should include all the people who live with you at present and all the people who will live with you when you are re-housed including any children who stay with you overnight under residence and contact (access) arrangements.

| Title | Surname | First Name(s) | D.O.B | Relationship to you | Tick if living away* | To be re-housed with you | Child Access |
|-------|---------|---------------|-------|---------------------|--------------------------|---|---|
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> | Y <input type="checkbox"/> N <input type="checkbox"/> |

| | |
|---|--|
| *If you have ticked living away please give their address and why they do not live with you. | |
| Address | |
| Reason | |
| If you have residence and contact (access) with children, how many nights per week do they stay with you? | |
| Please give the main place of residence of the children. | |
| Address | |

i Advice to applicants: Section 3 – Please note that if you or any joint applicant has access arrangements which include overnight stays you will be required to provide proof such as a Court Order or a Minute of Agreement. We will also write for confirmation from the other parent or guardian with whom any child or children reside.”

Section 4: Immigration Control & Non UK Nationals

| | |
|---|--|
| Under the Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999, local authorities are required to establish whether a person qualifies for public assistance including housing. | |
| (a) Are you and any joint applicant a British Citizen who has resided in the UK, Isle of Man, Channel Islands or Republic of Ireland for at least the past 2 years? <i>(If yes please continue to Question 5)</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| (b) Do you or any joint applicant have indefinite or exceptional leave to remain in the UK? <i>If yes please give details:</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |
| (c) Do you or any joint applicant have any restrictions on your recourse to public funds? <i>If yes please give details:</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |

i Advice to applicants: Section 4 – For non UK nationals – In order to comply with immigration law we may require seeing your passport/residence permit in order to check that you are entitled to be allocated Council Housing

Section 5: Supervision Orders


| | |
|---|---|
| <p>Are you or any joint applicant or anyone to be re-housed with you required to register with the police under the Sex Offenders Act 1997? <i>If yes, please provide details</i></p> | <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> |
| | |

Section 6: Anti Social Behaviour

| | |
|--|---|
| <p>Are you or anyone who is moving with you the subject of an Anti-Social Behaviour Order (ASBO) or has received a final warning either from the Police, Local Authority or your landlord for anti social behaviour?</p> | <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> |
| <p><i>If yes, please provide details including dates:</i></p> | <p><i>Dates</i></p> |
| | |
| | |
| | |
| | |

Section 7: Personal Connection

| | |
|--|---|
| <p>Are you or anyone who will live with you related to anyone who is or was an East Ayrshire Councillor, or a board member or management committee member of Atrium Homes, Cunninghame Housing Association, Riverside Scotland or Shire Housing Association? <i>If yes, please give details:</i></p> | <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> |
| | |

 Advice to applicants: Section 7 By law we have to ask this question, but it will not affect your application.

Section 8: Personal Circumstances

| | |
|---|--|
| (a) HEALTH AND DISABILITY | |
| Is your present home unsuitable due to someone in your household's health or due to a disability? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| If yes, have you completed a Health and Disability Form which is available from your local housing office? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| (b) CARE AND SUPPORT | |
| Are you moving to provide or receive care and support either to or from a relative or carer? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| If yes, have you completed a Care and Support Application Form which is available from your local housing office? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| (c) HOMELESSNESS | |
| Are you homeless or are you threatened with homelessness? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| If yes, have you made a homeless presentation to your local council? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |

| If yes, provide details of which office and date of presentation | Dates |
|--|-------|
| | |
| | |

i Advice to applicants: Section 8(c) If you are homeless or about to become homeless please contact East Ayrshire Council's Housing Options Service at John Dickie Street, Kilmarnock, telephone 01563 554554 for advice.

(d) YOUNG PEOPLE LEAVING CARE

Please complete this section if you are a young person who is looked after and accommodated, e.g. living in a children's care home, a residential school, with foster carers or with a link carer

Have you been looked after and accommodated?

YES: NO:

If yes, please details below:

Unit or Carer's Name:

Address:

Telephone Number:

(e) APPLICATION DEFERRAL

If you do not wish to be considered for a property for the foreseeable future you can choose to defer (postpone) your application.

Do you wish your application to be deferred?

YES: NO:

If yes, please give your reasons and give the date you wish your application to be deferred until:

Reason:

Do you wish your application to be deferred?


Month:

Year:


Section 9: Your Present Accommodation

| | | |
|--|--------------------------|--|
| (a) Please give the date you commenced living at your present address | | Date: |
| (b) Please tick the box that best describes your current accommodation | | |
| Private tenant | <input type="checkbox"/> | Owner Occupier <input type="checkbox"/> |
| Landlord's Name and Address: | | No permanent accommodation <input type="checkbox"/> |
| | | Living with parents <input type="checkbox"/> |
| | | Living with other relatives <input type="checkbox"/> |
| Housing Association Tenant | <input type="checkbox"/> | Living with friends <input type="checkbox"/> |
| Landlord's Name and Address: | | Room in lodgings <input type="checkbox"/> |
| | | Temporary accommodation <input type="checkbox"/> |
| | | Local Authority Care Leaver <input type="checkbox"/> |
| Council Tenant | <input type="checkbox"/> | <i>Name of Local Authority:</i> |
| Landlord's Name and Address: | | |
| | | |
| | | |

| (c) H.M. FORCES PERSONNEL ONLY | |
|--|--|
| Do you live in Barracks | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| or other HM Forces Tied Tenancy | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| Please state your date of discharge from HM Forces | Date |
| Are you being discharged due to injuries or disabilities sustained while serving in the Armed Forces? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| Are there other circumstances that are required to be taken into consideration that relates to your discharge from HM Forces? <i>If yes, please detail:</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |
| Please provide the date you are required to leave your accommodation | Date |

 Advice to applicants: Section 9(c) Applicants serving in the armed forces will normally have their application deferred until 6 weeks before their date of discharge

| (d) TIED TENANTS ONLY | |
|--|--|
| Please provide the date you will be expected to leave your accommodation | Date |
| Do you wish your application to be deferred until 6 months prior to you leaving your employment? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |

 Advice to applicants: Section 9(d) If you are a tied tenant we would normally defer your application until 6 months prior to you leaving your employment, if you choose to make your application active you will be expected to fully occupy any tenancy offered to you as your principal home.

| (e) WHAT TYPE OF ACCOMMODATION DO YOU CURRENTLY LIVE IN? <i>Please tick all that apply</i> | | | |
|--|--------------------------|--|------------------------------|
| 4 in a block ground | <input type="checkbox"/> | Residential development for older people | <input type="checkbox"/> |
| 4 in a block upper | <input type="checkbox"/> | Other Supported Accommodation | <input type="checkbox"/> |
| Tenement ground | <input type="checkbox"/> | Amenity | <input type="checkbox"/> |
| Tenement 1st Floor | <input type="checkbox"/> | Bedsit ground | <input type="checkbox"/> |
| Tenement 2nd floor | <input type="checkbox"/> | Bedsit upper | <input type="checkbox"/> |
| Tenement 3rd floor | <input type="checkbox"/> | Hostel | <input type="checkbox"/> |
| Maisonette ground | <input type="checkbox"/> | Hotel | <input type="checkbox"/> |
| Maisonette 1st floor | <input type="checkbox"/> | Bed and Breakfast | <input type="checkbox"/> |
| Maisonette 2nd floor | <input type="checkbox"/> | Local Authority Residential Care | <input type="checkbox"/> |
| Semi detached | <input type="checkbox"/> | Hospital | <input type="checkbox"/> |
| End Terrace | <input type="checkbox"/> | Nursing Home | <input type="checkbox"/> |
| Mid Terrace | <input type="checkbox"/> | Caravan | <input type="checkbox"/> |
| Detached | <input type="checkbox"/> | Prison | <input type="checkbox"/> |
| Bungalow detached | <input type="checkbox"/> | Student Accommodation | <input type="checkbox"/> |
| Bungalow semi | <input type="checkbox"/> | Other <i>(please give details)</i> | <input type="checkbox"/> |
| Bungalow end terrace | <input type="checkbox"/> | | |
| Bungalow mid terrace | <input type="checkbox"/> | | |
| How many bedrooms does the property have? | | | |
| How many bedrooms do you have for exclusive use of you and any people who will be moving with you? | | | |
| Do you share a bathroom or kitchen (or both) with people who will NOT be moving with you? | | YES: <input type="checkbox"/> | NO: <input type="checkbox"/> |

Section 10: Your Previous Accommodation

Please give details of the addresses you have lived at during the last 3 years starting with your most recent address.

MAIN APPLICANT

| Previous address 1 | Date from: | Date to: |
|--|------------|----------|
| | | |
| Were you: <i>(please tick)</i> an owner <input type="checkbox"/> a tenant <input type="checkbox"/> or living with relatives <input type="checkbox"/> | | |
| Reason for leaving: | | |
| If you were the tenant please provide the landlord's name and address: | | |
| | | |
| | | |
| Previous address 2 | Date from: | Date to: |
| | | |
| Were you: <i>(please tick)</i> an owner <input type="checkbox"/> a tenant <input type="checkbox"/> or living with relatives <input type="checkbox"/> | | |
| Reason for leaving: | | |
| If you were the tenant please provide the landlord's name and address: | | |
| | | |
| | | |
| Previous address 3 | Date from: | Date to: |
| | | |
| Were you: <i>(please tick)</i> an owner <input type="checkbox"/> a tenant <input type="checkbox"/> or living with relatives <input type="checkbox"/> | | |
| Reason for leaving: | | |

Please give details of the addresses you have lived at during the last 3 years starting with your most recent address.

JOINT APPLICANT

Previous address 1

Date from:

Date to:

Were you: *(please tick)*

an owner a tenant or living with relatives

Reason for leaving:

If you were the tenant please provide the landlord's name and address:

Previous address 2

Date from:

Date to:

Were you: *(please tick)*

an owner a tenant or living with relatives

Reason for leaving:

If you were the tenant please provide the landlord's name and address:

Previous address 3

Date from:

Date to:

Were you: *(please tick)*

an owner a tenant or living with relatives

Reason for leaving:

If you were the tenant please provide the landlord's name and address:

| | | |
|--|------------|----------|
| Previous address 4 | Date from: | Date to: |
| | | |
| Were you: <i>(please tick)</i> an owner <input type="checkbox"/> a tenant <input type="checkbox"/> or living with relatives <input type="checkbox"/> | | |
| Reason for leaving: | | |
| If you were the tenant please provide the landlord's name and address: | | |
| | | |
| | | |

| | |
|---|--|
| Have you been evicted from a tenancy within the last 3 years? <i>If Yes, please give reason:</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| | |

Section I I: Resident Outwith the District

| | |
|---|--------------------------|
| Please complete this section if you are currently resident outwith East Ayrshire. Do you wish to move to East Ayrshire for one of the following reasons <i>(please tick where applicable)</i> : | |
| Currently employed or has been offered employment in the area | <input type="checkbox"/> |
| Wishing to move to seek employment | <input type="checkbox"/> |
| Wishing to be nearer a relative or carer | <input type="checkbox"/> |
| Have a special social reason or medical reason | <input type="checkbox"/> |
| Harassment or domestic violence | <input type="checkbox"/> |
| If none of the above applies please state your reason for wishing to move to East Ayrshire: <i>Please note that you will be asked to supply further information and proof of this.</i> | <input type="checkbox"/> |
| | |

Section 12: Aids and Adaptations

| | |
|---|--|
| (a) Do you live in a house that is specially adapted? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| <i>If yes, please give details of the adaptations:</i> | |
| | |
| (b) Will you require special aids or adaptations in any future accommodation? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
| <i>If yes, please give details of what adaptations are required:</i> | |
| | |

Section 13: Your Housing Requirements

| | | | |
|---|--------------------------|---------------------------|--------------------------|
| <p>Please tick which SEARCH landlords you WANT to be considered for. <i>You may tick as many as you wish. N.B. Please note that you will only be matched for accommodation that your chosen Landlord has in your areas of choice.</i></p> | | | |
| Atrium Homes | <input type="checkbox"/> | Riverside Scotland | <input type="checkbox"/> |
| Cunninghame Housing Association | <input type="checkbox"/> | Shire Housing Association | <input type="checkbox"/> |
| East Ayrshire Council | <input type="checkbox"/> | All of the above | <input type="checkbox"/> |

| | |
|---|--|
| <p>NOMINATION ARRANGEMENTS WITH OTHER HOUSING PROVIDERS WHO ARE NOT PART OF SEARCH</p> | |
| <p>The Council operate Nomination Agreements with other social housing providers in the area (See booklet page 11 for details and a list of organisations).</p> | |
| Do you wish to be considered for housing with other social housing providers within East Ayrshire? | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |



Advice to applicants: Section 13 If you tick yes, information contained within your housing application and any details regarding your current tenancy (if applicable) will be supplied to the Housing Association/Registered Social Landlord upon request.

HEATING: What type of heating do you want? You may tick as many boxes as you wish.
N.B. Please note that you will only be matched for properties with your requested heating types.

| | | | |
|-------------|--------------------------|---------------|--------------------------|
| Gas CH | <input type="checkbox"/> | Solid Fuel CH | <input type="checkbox"/> |
| Electric CH | <input type="checkbox"/> | | |

ACCOMMODATION: What type of accommodation would you like to be considered for?
 You may tick as many boxes as you wish

| | | | |
|----------------------|--------------------------|---------------------------|--------------------------|
| 4 in a block ground | <input type="checkbox"/> | End Terrace | <input type="checkbox"/> |
| 4 in a block upper | <input type="checkbox"/> | Mid Terrace | <input type="checkbox"/> |
| Tenement ground | <input type="checkbox"/> | Detached | <input type="checkbox"/> |
| Tenement 1st Floor | <input type="checkbox"/> | Bungalow detached | <input type="checkbox"/> |
| Tenement 2nd floor | <input type="checkbox"/> | Bungalow semi | <input type="checkbox"/> |
| Tenement 3rd floor | <input type="checkbox"/> | Bungalow end terrace | <input type="checkbox"/> |
| Maisonette ground | <input type="checkbox"/> | Bungalow mid terrace | <input type="checkbox"/> |
| Maisonette 1st floor | <input type="checkbox"/> | Bedsit ground | <input type="checkbox"/> |
| Maisonette 2nd floor | <input type="checkbox"/> | Bedsit upper | <input type="checkbox"/> |
| Semi detached | <input type="checkbox"/> | Housing for Older People* | <input type="checkbox"/> |



*Housing for Older People - Further information is contained within the Housing for Older People Booklet. If you have ticked that you wish to be considered for housing for older people you will be asked to complete another form. Your needs as identified within this form will be assessed against the specified criteria for this type of accommodation and you will be awarded priority in accordance with your circumstances. This assessment will also be used to identify any community care needs you may have to ensure that you are offered appropriate support.

What size of house would you accept? *You may tick more than 1 box*

N.B. *There are rules where housing providers will only allow you to be allocated certain house sizes depending on how many people are included on your application and in accordance with their Allocation Policy.*

1 bed

2 bed

3 bed

4 bed


5 bed

Section 14: Mutual Exchange (Council/Housing Association Tenants only)

Would you consider a mutual exchange?

If yes your name and address may be passed on to other tenants

YES: NO:

 **Advice to applicants: Section 14 A mutual exchange is where tenants of either the Council or a Housing Association can swap houses with each other, subject to approval of their landlord.**

Section 15: Areas of Choice

Which area/s do you wish to be housed in?

(Please tick) You may choose 5 areas

| KILMARNOCK | | | | | |
|--|--------------------------|--|--------------------------|---------------|--------------------------|
| KILMARNOCK NORTH any area | <input type="checkbox"/> | Altonhill | <input type="checkbox"/> | Knockinlaw | <input type="checkbox"/> |
| Longpark | <input type="checkbox"/> | Bonnyton | <input type="checkbox"/> | New Farm Loch | <input type="checkbox"/> |
| Onthank | <input type="checkbox"/> | | | | |
| Central North <small>(i.e. North of the railway line, including Old Kirk Place, Boyd St, Dean St, Gillsburn Gdns, Hill St and Hillhead Crescent)</small> | <input type="checkbox"/> | Scott Road | <input type="checkbox"/> | | <input type="checkbox"/> |
| Central South <small>(Richardland Pl, Gallion Walk etc, Springhill, South Hamilton Court)</small> | <input type="checkbox"/> | Woodstock <small>(Grange St, Park St, Morton Place, North Hamilton St/Pl & Fullarton St)</small> | <input type="checkbox"/> | London Road | <input type="checkbox"/> |

| | | | | | |
|--|--|---|--------------------------|--|--------------------------|
| KILMARNOCK SOUTH any area | <input type="checkbox"/> | Bellfield | <input type="checkbox"/> | Riccarton East | <input type="checkbox"/> |
| Riccarton West | <input type="checkbox"/> | Shortlees | <input type="checkbox"/> | | |
| IRVINE VALLEY | Any area i.e. Crookedholm, Hurlford, Galston, Newmilns, Darvel, Moscow and Priestland. | | | | <input type="checkbox"/> |
| CROOKEDHOLM | | | | | <input type="checkbox"/> |
| HURLFORD any area | <input type="checkbox"/> | Galston Road | <input type="checkbox"/> | Drumleyhill | <input type="checkbox"/> |
| Blair Avenue | <input type="checkbox"/> | | | | |
| GALSTON any area | <input type="checkbox"/> | Gauchalland, Gateside, Portland Road | <input type="checkbox"/> | Western Road, Park Road, Chapel Lane | <input type="checkbox"/> |
| Maxwood and Castlevie | <input type="checkbox"/> | | | | |
| NEWMILNS any area | <input type="checkbox"/> | Gilfoot, Masonholm, Queens Crescent and Strath Crescent | <input type="checkbox"/> | Nelson Street, Greenside, Ladeside and Borebrae | <input type="checkbox"/> |
| High Street, King Street, Isles Terrace | <input type="checkbox"/> | | | | |
| DARVEL any area | <input type="checkbox"/> | Central, Causeway, Drumlog Crescent | <input type="checkbox"/> | Dublin, West Edith Street, Lochore Terrace | <input type="checkbox"/> |
| John Morton Crescent, Glen Crescent | <input type="checkbox"/> | | | | |
| PRIESTLAND | <input type="checkbox"/> | MOSCOW | <input type="checkbox"/> | CROSSHOUSE | <input type="checkbox"/> |
| GATEHEAD | <input type="checkbox"/> | KNOCKENTIBER | <input type="checkbox"/> | KILMAURS | <input type="checkbox"/> |
| FENWICK (incl Fultons Cres) | <input type="checkbox"/> | WATERSIDE | <input type="checkbox"/> | | |

| | | | | | |
|--|--------------------------|---|--------------------------|--|--------------------------|
| STEWARTON any area | <input type="checkbox"/> | Lainshaw, Ravenscraig, Rigghead | <input type="checkbox"/> | Robertland | <input type="checkbox"/> |
| Dean Street, The Crescent | <input type="checkbox"/> | | | | |
| DUNLOP | <input type="checkbox"/> | LUGTON | <input type="checkbox"/> | | |
| CUMNOCK any area | <input type="checkbox"/> | Netherthird | <input type="checkbox"/> | Craigens | <input type="checkbox"/> |
| Skerrington | <input type="checkbox"/> | Car Road/Cairn Road | <input type="checkbox"/> | Glenlamont areas | <input type="checkbox"/> |
| Wylie Cres area | <input type="checkbox"/> | The Glebe area | <input type="checkbox"/> | Keir Hardie Hill area | <input type="checkbox"/> |
| Drumbrochan Road & Townhead Street area | <input type="checkbox"/> | Barshare area | <input type="checkbox"/> | | |
| MUIRKIRK any area | <input type="checkbox"/> | Village area | <input type="checkbox"/> | Smallburn Housing area | <input type="checkbox"/> |
| CATRINE any area | <input type="checkbox"/> | Village area | <input type="checkbox"/> | Shawwood Housing area | <input type="checkbox"/> |
| St Cuthbert Street area | <input type="checkbox"/> | | | | |
| SORN | <input type="checkbox"/> | OCHILTREE | <input type="checkbox"/> | SKARES | <input type="checkbox"/> |
| NEW CUMNOCK any area | <input type="checkbox"/> | Pathhead area | <input type="checkbox"/> | Village i.e. Castle, Afton Bridgend, Mason Avenue The Holm & Afton Road areas | <input type="checkbox"/> |
| Cairnhill Housing area | <input type="checkbox"/> | The Leggate Area/ Dalleagles | <input type="checkbox"/> | | |
| LOGAN/LUGAR any area | <input type="checkbox"/> | Logan Village | <input type="checkbox"/> | Lugar Village | <input type="checkbox"/> |
| AUCHINLECK any area | <input type="checkbox"/> | Stoner Crescent, Glenshamrock Drive area | <input type="checkbox"/> | Sorn Road & Coal Road areas | <input type="checkbox"/> |

| | | | | | |
|---|--------------------------|------------------|--------------------------|------------------------|--------------------------|
| MAUCLINE any area | <input type="checkbox"/> | Welton Road area | <input type="checkbox"/> | Jean Armour Drive area | <input type="checkbox"/> |
| West Park Ave/ Barskimming Road area | <input type="checkbox"/> | | | | |

| | | | | | |
|-------------------------|--|--|--|--|--------------------------|
| DOON VALLEY AREA | Any area i.e. Patna, Dalmellington, Drongan, Rankinston, Dalrymple, Hollybush and Hayhill | | | | <input type="checkbox"/> |
|-------------------------|--|--|--|--|--------------------------|

| | | | | | |
|-----------------------|--------------------------|-------------------------------|--------------------------|----------------------------------|--------------------------|
| PATNA any area | <input type="checkbox"/> | Doonbank Cres | <input type="checkbox"/> | Jellieston Terr area | <input type="checkbox"/> |
| Polnessan | <input type="checkbox"/> | Carskeoch Dr/ Main St area | <input type="checkbox"/> | Dalvennan Ave/Keirs Cres area | <input type="checkbox"/> |

| | | | | | |
|----------------------------------|--------------------------|--------------|--------------------------|------------------------|--------------------------|
| DALMELLINGTON any area | <input type="checkbox"/> | Village area | <input type="checkbox"/> | Bellsbank Housing area | <input type="checkbox"/> |
|----------------------------------|--------------------------|--------------|--------------------------|------------------------|--------------------------|

| | | | | | |
|-------------------------|--------------------------|------------------------|--------------------------|------------------------|--------------------------|
| DRONGAN any area | <input type="checkbox"/> | Mill 'O'Shield Rd area | <input type="checkbox"/> | Barbieston Avenue area | <input type="checkbox"/> |
|-------------------------|--------------------------|------------------------|--------------------------|------------------------|--------------------------|

| | | | | | |
|-------------------|--------------------------|------------------|--------------------------|------------------|--------------------------|
| RANKINSTON | <input type="checkbox"/> | DALRYMPLE | <input type="checkbox"/> | HOLLYBUSH | <input type="checkbox"/> |
| HAYHILL | <input type="checkbox"/> | | | | |

EXCEPTIONS

Please note: It is your responsibility to list below any street(s) in your area(s) of choice where you do *not* wish to be offered housing. Failure to do so could result in you being offered a property on a street you do not wish.

Please remember the more restrictive in your choices you are, the longer you may have to wait. Also please check with your local housing office that the type of accommodation you want is available in the areas you have chosen.

| | |
|------------------|--|
| Street 1: | |
| Street 2: | |
| Street 3: | |
| Street 4: | |
| Street 5: | |

Section 16: Contacts

If you did not fill in this form yourself, please give details of who did
(please let this person know you are providing us with their details)

| | |
|---------------------|--|
| Name | |
| Address | |
| | |
| Telephone number(s) | |

Do you want this person or any other person to make enquiries regarding your application on your behalf in the future?
*If yes and details are **different** from above please give details below – again, please let this person know you are providing us with their details*

YES: NO:

| | |
|----------------------------|-------|
| Name | |
| Address | |
| | |
| Telephone number(s) | |
| Representative's Signature | Date: |

Do you want this person to be the main point of contact regarding your housing application in the future, (that would mean that all correspondence regarding your application would go to them)

YES: NO:

Section 17: Additional Information

Are there any circumstances you would want us to take account of including any additional support requirements you may have? *(Please use the space below and continue on a separate sheet if required)*

Section 18: No Fixed Abode Application

If you have no fixed address please complete the following giving details of where you stay. This is used to calculate the number of points to award you.

Please provide details of all the occupants who reside within each property

| Addresses of each property | Name(s) | D.O.B | Relationship to you | Number of bedrooms | Number of nights you stay |
|----------------------------|---------|-------|---------------------|--------------------|---------------------------|
| | | | | | |
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Section 19: Equal Opportunities Monitoring

MAIN APPLICANT

All participating landlords are committed to equal opportunities and we would like to monitor our performance in this area. We would be grateful if you could assist us by answering the following questions.

Please note these questions are for monitoring purposes only and will not be used when assessing your application. Please note that completion of these questions is not mandatory.

Question Refused (*tick box*)

Single

Do you consider yourself to:

Married

Be blind or visually impaired?

Divorced

Be profoundly deaf or hearing impaired?

Widowed

Have a physical disability

Legally separated

Have any other disability

Please give details below

Gender

Do you consider anyone other than the applicant or joint applicant who will be a part of your household to have a disability

Please give details below

YES: NO:

What is your ethnic group?

White Scottish

Asian Chinese

White other British

Asian Other

| | | | |
|---|--------------------------|--|--------------------------|
| White Irish | <input type="checkbox"/> | Asian Other | <input type="checkbox"/> |
| White Other | <input type="checkbox"/> | Asian Indian | <input type="checkbox"/> |
| Black African | <input type="checkbox"/> | Asian Pakistani | <input type="checkbox"/> |
| Black Caribbean | <input type="checkbox"/> | Asian Bangladeshi | <input type="checkbox"/> |
| Black other | <input type="checkbox"/> | Other ethnic background. <i>Please provide details below:</i> | <input type="checkbox"/> |
| Any other mixed Background. <i>Please provide details below:</i> | <input type="checkbox"/> | | |
| | | | |
| | | What is your Nationality? | |
| Gypsy/Traveller | <input type="checkbox"/> | | |

| JOINT APPLICANT | | | |
|--|--------------------------|---|--------------------------|
| <p>All participating landlords are committed to equal opportunities and we would like to monitor our performance in this area. We would be grateful if you could assist us by answering the following questions.</p> <p><i>Please note these questions are for monitoring purposes only and will not be used when assessing your application. Please note that completion of these questions is not mandatory.</i></p> | | | |
| Question Refused (<i>tick box</i>) | | | <input type="checkbox"/> |
| Male | <input type="checkbox"/> | Do you consider yourself to: | |
| Female | <input type="checkbox"/> | Be blind or visually impaired? | <input type="checkbox"/> |
| Single | <input type="checkbox"/> | Be profoundly deaf or hearing impaired? | <input type="checkbox"/> |
| Married | <input type="checkbox"/> | Have a physical disability | <input type="checkbox"/> |

| | | | |
|-------------------|--------------------------|---|--------------------------|
| Divorced | <input type="checkbox"/> | Have any other disability <i>Please give details below</i> | <input type="checkbox"/> |
| Widowed | <input type="checkbox"/> | | |
| Legally separated | <input type="checkbox"/> | | |

| | |
|--|--|
| Do you consider anyone other than the applicant or joint applicant who will be a part of your household to have a disability <i>Please give details below</i> | YES: <input type="checkbox"/> NO: <input type="checkbox"/> |
|--|--|

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| |
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| | | | |
|---|--------------------------|--|--------------------------|
| What is your ethnic group? | | | |
| White Scottish | <input type="checkbox"/> | Asian Chinese | <input type="checkbox"/> |
| White other British | <input type="checkbox"/> | Asian Other | <input type="checkbox"/> |
| White Irish | <input type="checkbox"/> | Asian Other | <input type="checkbox"/> |
| White Other | <input type="checkbox"/> | Asian Indian | <input type="checkbox"/> |
| Black African | <input type="checkbox"/> | Asian Pakistani | <input type="checkbox"/> |
| Black Caribbean | <input type="checkbox"/> | Asian Bangladeshi | <input type="checkbox"/> |
| Black other | <input type="checkbox"/> | Other ethnic background. <i>Please provide details below:</i> | <input type="checkbox"/> |
| Any other mixed Background. <i>Please provide details below:</i> | <input type="checkbox"/> | | |
| | | | |
| | | What is your Nationality? | |
| Gypsy/Traveller | <input type="checkbox"/> | | |

FOR OFFICE USE ONLY

| | | | |
|--|--|--------|--|
| Application for Housing Reference Number | | | |
| Date received | | Status | |
| Notes | | | |
| | | | |

| TENANCIES CHECKED | | | | | | | |
|-------------------|------|------------|------|-----------------|------|------------|------|
| Main Applicant | | | | Joint Applicant | | | |
| | Rent | Other Debt | Date | | Rent | Other Debt | Date |
| 1 | | | | 1 | | | |
| 2 | | | | 2 | | | |
| 3 | | | | 3 | | | |
| 4 | | | | 4 | | | |
| 5 | | | | 5 | | | |

| | |
|-----------------------|-------|
| Processor's Signature | Date: |
|-----------------------|-------|



DATA PROTECTION

SEARCH is a Partnership involving East Ayrshire Council and Registered Social Landlords, Atrium Homes, Cunninghame Housing Association, Riverside Scotland and Shire Housing Association.

Contact details for all of the Partners can be found at the end of this document.

The Council and partners are data controllers in common and your application may be processed and viewed by all or any of the relevant Partners. Any data protection queries can be directed to the Council's Data Protection Officer using the details noted below. If your issues are not resolved following internal discussions, further enquiries or complaints can be made to the Information Commissioner's Office, contact details below:

Data Protection Officer, Council Headquarters, London Road, Kilmarnock, KA3 7BU

Tel: 01563 576094

Email: information.governance@east-ayrshire.gov.uk

Information Commissioner's Office
45 Melville Street, Edinburgh, EH3 7HL

Tel: 03031231115

Email: scotland@ico.org.uk

It is necessary to process this information to perform a public task which is of substantial public interest – in other words to allow us to allocate you appropriate housing.

Your information will be available to all of the SEARCH partners. In order to fully assess your application, the SEARCH partners can ask for additional information from other agencies and Health and Social Services professionals in connection with your application

You have the right to request any data held about you, the right to have inaccurate data corrected, the right to restrict or object to the processing of your data and the right to data portability in certain circumstances.

Your information will be retained for 5 years following cancellation of your application, or 5 years following the termination of your tenancy agreement if rehoused.

East Ayrshire Council Housing Offices

North West Kilmarnock

Western Road, KILMARNOCK, KA3 1NQ

Tel: 01563 555 670

Kilmarnock Central and South

Council Offices, John Dickie Street

KILMARNOCK, KA1 1BY

Tel: 01563 576 618

Irvine Valley and Ballochmyle

Council Offices, John Dickie Street

KILMARNOCK, KA1 1BY

Tel: 01563 554 664 or 554 653

Cumnock

Rothesay House, 1 Greenholm Road

CUMNOCK, KA18 1LH

Tel: 01290 427 727 or 01290 427 728

Doon Valley

Dalmellington Area Centre, 33 Main Street

DAMLELLINGTON, KA6 7QL

Tel: 01292 552 887

SEARCH Partner Landlords

Atrium Homes

14 Central Avenue, Shortlees, KILMARNOCK, KA1 4PS

Tel: 01563 528 816

Cunninghame Housing Association

42 Campbeltown Drive, KILMARNOCK, KA3 1JX

Tel: 01294 607 550

Riverside Scotland

44-46 Bank Street, IRVINE, KA12 0LP

Tel: 0345 112 6600

Shire Housing Association

Netherthird House, Netherthird

CUMNOCK, KA18 3DB

Tel: 01290 421 130