



## Manchester Jewish Housing Association

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# APPLICATION FOR HOUSING

**CONFIDENTIAL**

Applicants should note that completion of this form does not indicate any right to claim or to expect that their application will be successful. All applications will be dealt with sympathetically. It should be noted that the demand for accommodation usually exceeds the supply.

**Housing scheme(s) applied for:**

Carmel Court, Holland Road Manchester 8 <input type="checkbox"/>	Laurel Court, Holland Road Manchester 8 <input type="checkbox"/>	Shalom Lodge, York Road St Annes-on-Sea <input type="checkbox"/>
Gan Eden, Salford 7 <input type="checkbox"/>	Other:.....	

1. Full Name: .....	Marital Status : .....	Age: .....	Date of birth: .....
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Address:  
.....  
..... Telephone Number: .....

How long at this address? .....

National Insurance Number:

**If applying for double accommodation**

2. Full name of second applicant: .....	Age: .....	Date of birth: .....
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Relationship to first applicant:

Address:  
.....  
..... Telephone Number: .....

How long at this address? .....

**Please tick where appropriate:**

3. Owner       Rented       Lodger       Furnished       Unfurnished

4. Name and address of landlord or agent if rented:  
.....

5. Give details of accommodation, do you share any facilities? If so please list:  
.....

6. Rent/Mortgage paid per week/month:

£ .....

7. Do you live alone?

Yes:

No:

If the answer is No:

With whom do you live?

Do they look after you? .....

Do they share or contribute to expenses? .....

8. Please list any other homes you have lived in over the last three years.

Do not include your current home.

1) Address: .....

From (month,year): ..... To (month,year): .....

Name and address of landlord or agent if rented:  
.....

2) Address: .....

From (month,year): ..... To (month,year): .....

Name and address of landlord or agent if rented:  
.....

3) Address: .....

From (month,year): ..... To (month,year): .....

Name and address of landlord or agent if rented:  
.....

**9. Do you or your partner have ANY outstanding debts with Landlords?** Yes  No   
 (please tick as appropriate)

Name and address of Landlord: ..... Amount £.....  
 .....

Name and address of Landlord: ..... Amount £.....  
 .....

Have you, or has ANY other member of your family who will be rehoused with you, been evicted for anti-social behaviour, or have you or they any legal action pending?  
 (please tick as appropriate) Yes  No

If Yes, give details below:  
 .....

**10. Do you or anybody moving with you have any unspent convictions?** Yes  No   
 Please detail below:  
 .....  
 .....  
 .....

**11. Name and address of Doctor:**  
 .....  
 .....  
 ..... Telephone Number: .....

**12. Are you employed?** Yes  No  Full or part-time:  Self-employed:

If the answer is Yes:  
 Occupation: .....  
 Name and address of employer, or business address:  
 .....  
 .....

**13. Name and address of Personal Contact:** Relationship: .....  
 .....  
 ..... Telephone Number: .....

Please tick where appropriate

14. Do you qualify for Housing Benefit?

Yes:  No:  Don't know:

Are you in receipt of any other state benefits?

Yes:  No:

If yes, please state which benefit(s) you receive:

.....

.....

.....

**15. Reasons for applying for rehousing:**

Please give your reason(s) for applying. (Tick all boxes that apply to your circumstances)

a) Homeless reasons

c) Other reasons

Emergency (eg: fire/flood)

To move nearer family/friends

Family or friends unable to accommodate

To live with partner

Financial difficulties (mortgage/rent arrears)

To allow access to children

Losing rented accommodation for other reasons

Can't afford private accommodation

Relationship breakdown

To be near cultural centre/facilities

To escape violence

To be near place of worship

Split family sharing house

To be near doctor

b) Due to harassment

To be near hospital

A problem with noise or neighbours

To receive support

To escape racial harassment

To provide support

To escape sexual harassment

Subject to vandalism/break-ins

**16. Please give any other information to help your application:**

.....

.....

.....

.....

**17. Ethnic Origin**

To enable us to achieve our policy of equal opportunities in housing, we would be grateful if you would place ticks against the group to which you consider your household belongs:

(Refusal to complete this section will not prejudice your application)

*Tick one only from these options:*

- |                  |                          |                        |                          |
|------------------|--------------------------|------------------------|--------------------------|
| Asian            | <input type="checkbox"/> | British/European       | <input type="checkbox"/> |
| Caribbean        | <input type="checkbox"/> | Irish                  | <input type="checkbox"/> |
| African          | <input type="checkbox"/> | Combination            | <input type="checkbox"/> |
| South-East Asian | <input type="checkbox"/> | Refused                | <input type="checkbox"/> |
|                  |                          | Other (please specify) | <input type="checkbox"/> |
- .....

*Tick one only from these options:*

- |                        |                          |
|------------------------|--------------------------|
| Black                  | <input type="checkbox"/> |
| White                  | <input type="checkbox"/> |
| Mixed                  | <input type="checkbox"/> |
| Other (please specify) | <input type="checkbox"/> |
- .....

**18. Your Nationality**

The law says we must ask the following questions. Regrettably, if you do not answer them, MJHA may not consider your application. We may contact the Home Office for further information.

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| Has the applicant or joint applicant come to live in the United Kingdom in the last five years? | <input type="checkbox"/> | <input type="checkbox"/> |
| Has the applicant or joint applicant been excluded from claiming any state benefits?            | <input type="checkbox"/> | <input type="checkbox"/> |

**19. Local Authority Nominations:**

Every housing association is required to have a nomination agreement with to the Local Authority in which the housing scheme is located. If you currently live within the boundaries of the area in which the scheme you are applying for is located, you may have to register for nomination with the Local Authority Housing Department.

Please state date application was made with Local Authority:.....

Name of Local Authority:.....

**The Data Protection Act 1984** says that we must treat your application confidentially and only disclose information in it to certain people or organisations. They are officers and members of MJHA; other Housing Associations; Health Authorities; the Probation Service; MPs; and other housing authorities including their elected members. But we may want to talk to other people or organisations to help us assess your application. We need your permission to do this. Can we have your permission?

Yes

No

Are you related to any member of the Association's Board of Management or member of staff?

Yes

No

If related please state the name of the person to whom related and relationship.

Name:..... Relationship:.....

**DECLARATION**

Please read this section and sign below:

I understand that it is a criminal offence to knowingly or recklessly give false information, or withhold relevant information in my application for rehousing. The information I have given is true to the best of my knowledge. I will inform MJHA if any of my circumstances change. I understand that if I give false information or withhold relevant information MJHA can take criminal proceedings against me, and that if I have moved into a new home the organisation managing the property can take legal action to evict me.

Signature of Applicant(s):..... Date:.....

.....

# **Manchester Jewish Housing Association**

## **6.2 LETTINGS POLICY PROCEDURE**

### **INTRODUCTION**

The Association's homes are always in demand. In order to ensure we allocate homes to those with the greatest housing need, a selection procedure is strictly followed. The following information details the nature of the procedure the Association follows.

### **CONDITIONS FOR APPLYING TO BECOME A RESIDENT OF THE ASSOCIATION**

There are no restrictive conditions for becoming a resident, but applicants can only apply for housing to which they would be eligible. For example, we can only select people of over 55 for our sheltered housing.

We operate an "open" waiting list and so any person can apply at any time for accommodation. All applicants are required to complete an application form. The forms must be filled in completely. The Association may request further information if required.

All applicants are visited before an offer of housing is made.

### **CRITERIA FOR SELECTING APPLICANTS: NOMINATION ARRANGEMENTS**

The Association is required to consider applicants for rehousing put forward by the Local Authority in which the accommodation is situated. Prospective tenants are always advised to register with the Local Authority and to seek nomination from the Local Authority to a particular scheme.



**CRITERIA FOR SELECTING APPLICANTS:  
ASSESSMENT OF AN APPLICANT'S HOUSING NEED**

All housing is let on the basis of need. To help us appreciate particular needs, we consider the following information gained from an applicant's application form and from interview:-

**1. Present Housing**

We consider whether an applicant is suffering from homelessness or overcrowding. Also whether their existing home is in a poor state of repair or lacks basic facilities (kitchens and bathrooms etc). In addition, we consider the lack of appropriate facilities because of the onset of disability or other incapacity. For example, the need for lifts or other adaptations.

**2. Medical Reasons**

We consider information received from medical practitioners and others concerned with the physical and mental welfare of the applicant.

**3. Social Reasons**

We consider difficulties arising from the sharing of existing housing, isolation, local neighbourhood problems, noise or other matters which make living in their current home difficult.

**4. Location**

We recognise the importance for some applicants to have ready access to local facilities such as a place of worship, clubs, day centres and other similar communal buildings.

**CRITERIA FOR SELECTING APPLICANTS: POINTS SYSTEM**

Based upon an assessment of a persons existing housing, as outlined in points 1-4 above, we allocate points according to an individual's needs. By totalling the points we can provide an overall assessment of an applicant's particular housing need. Tenancies are offered to applicants with the greatest number of points and those shown to be in the greatest housing need.

**TRANSFERS WITHIN THE ASSOCIATION'S OWN HOUSING STOCK**

The Association gives sympathetic consideration to all requests for transfers by tenants from its own stock. However, consent for a transfer will not be normally given for a transfer to a home which will then be underoccupied as a result of a transfer. All requests for transfers will be considered using the laid down criteria for selecting applicants.

## **6.3 Nomination arrangements**

6.3.1 The following nomination rights apply:-

Carmel Court	60%
Laurel Court	50%
Shalom Lodge	50%

## **6.4 Granting of Tenancies to Board Members, Staff and Immediate Family**

The granting of tenancies to members of the Board of Management, staff and the immediate families of both these groups is permitted, but only in certain circumstances. Homes & Communities Agency as an exemption to the relevant schedule of the Housing Act 1996 specifies these circumstances. Before granting a tenancy to any applicant falling within the scope described, the matter will be placed before the Tenancy and Housing Services Committee who will consider the application, and be satisfied that there will be no breach of the regulations applying to the granting of a tenancy. If a tenancy is accepted, the matter will be entered into the Public Register of Exemptions to the 1996 Housing Act, held by the Association for this purpose. In the above circumstances no member of the Board or member of the staff should play any part of the allocation process and must declare an interest.

## **APPEALS PROCEDURE GUIDE - APPLICANTS ASSESSMENTS**

### **Introduction**

An Appeal is a formal process against decisions arising from assessments and which the Applicant disagrees.

1.0 The appeal will be processed following verbal or written instruction from the Applicant , or his/her representative.

2.0 A meeting will take place within 14 days, either at the Associations office, or if appropriate within the confines of the Applicants home. The meeting will include the Housing Services Manager, Scheme Manager, and where appropriate representatives of other professional agencies. The Applicant may be accompanied by a friend, relative or other professional.

3.0 The needs of the Applicant, Staff and services available, and any impact on existing tenants, together with advice from other professional agencies will be considered, documented and copied to the Applicant, and where appropriate to other professional agencies.

4.0 If the matter is not resolved but it is felt that a decision made is in the best interest of the Applicant, or to protect the health, safety and welfare of the Applicant, Staff, or other relevant persons the original decision will be held, and appropriate action taken.

## **PROOF OF IDENTITY**

Prior to processing your application for housing we must have evidence of your identity. If you have a partner, we must also see evidence of their identity.

Please provide one document from each list.

Documents must be originals, we cannot accept photocopies.

### **List 1**

Birth or marriage certificate  
Full or provisional driving licence  
Passport  
Residence Permit, Alien Registration Certificate  
Immigration and National Directorate travel document  
Letter from the Home Office about immigration status

### **List 2**

Gas, electricity, phone (not mobile phone) or water bill in your name received within the last 3 months  
Letter from the Inland Revenue  
Letter from the Benefits Unit  
Letter from your bank/bank statement

All documents will be returned, or you may present any documentation at the MJHA office. Your documents will then be copied and immediately returned to you.



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