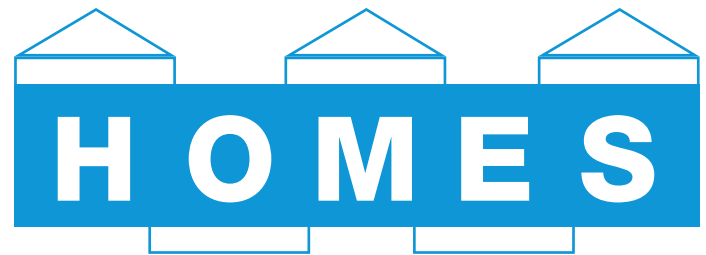


Midlothian



application form and guidance notes

Communicating Clearly

We are happy to translate on request and provide information and publications in other formats, including Braille, tape or large print.

Contact **0131 270 7500** or email:
housing.enquiries@midlothian.gov.uk

Office use only

Applicant name

Received on:

Application No

If you need help filling this form in please contact the Housing Services Team
Tel: **0131 271 3394**

For information about Midlothian Council
visit our website at:
www.midlothian.gov.uk
Tel: **0131 270 7500**

For information about Melville Housing visit:
www.melville.org.uk

Application for housing with Midlothian Homes

Guidance notes to help you fill in this form are shown on the left hand pages. Please complete all the sections of the form **that apply to you** in **CAPITAL LETTERS** using a PEN. The information you provide us will help us to assess your need for housing.

In certain places in the form you will see this symbol **P**. It means that you will have to supply us with proof of some of your circumstances. There is a checklist at the end of the form of all the pieces of information you need to supply us.

If you need help to complete the form, we will be happy to provide it. If your form has pieces of information missing on it, we will contact you, initially by telephone, to ask you to provide them. Once we have received all the information we need, we will contact you in writing to let you know that your name is now on our waiting list. We will ask you to check over the information we have about you just to see that it is correct.

About your present housing

Please look at the list opposite and tick as many boxes as apply to you and any joint applicant, if there is one.

Note that some circumstances are marked with an asterisk*. If this applies to you, please answer 1.2.

'Tied' accommodation is where your housing is provided with your job.

1. About your present housing

Only tick the boxes that apply to you.

1.1 Are you

	You	Joint Applicant
1. A council tenant	<input type="checkbox"/>	<input type="checkbox"/>
2. A housing association tenant	<input type="checkbox"/>	<input type="checkbox"/>
3. A tenant of a private landlord	<input type="checkbox"/>	<input type="checkbox"/>
4. An owner occupier	<input type="checkbox"/>	<input type="checkbox"/>
5. Living in family home/with parents/relatives/friends	<input type="checkbox"/>	<input type="checkbox"/>
6. Living in temporary accommodation (including adult residential accommodation, hostels, etc)	<input type="checkbox"/>	<input type="checkbox"/>
7. Living in a caravan or mobile home	<input type="checkbox"/>	<input type="checkbox"/>
8. Living in bed and breakfast accommodation	<input type="checkbox"/>	<input type="checkbox"/>
9. Sleeping rough/roofless	<input type="checkbox"/>	<input type="checkbox"/>
10. Living in tied accommodation*	<input type="checkbox"/>	<input type="checkbox"/>
11. Living in armed services accommodation*	<input type="checkbox"/>	<input type="checkbox"/>
12. In hospital*	<input type="checkbox"/>	<input type="checkbox"/>
13. In prison*	<input type="checkbox"/>	<input type="checkbox"/>
14. Living in children's residential accommodation*	<input type="checkbox"/>	<input type="checkbox"/>
15. Other <input type="text"/>		

1.2 If you have ticked any of the boxes marked with a *, state when you require housing. (give exact date if known).

You: Date:

Joint Applicant: Date:

1.3 Under the Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999, local authorities must establish whether a person qualifies for public assistance including housing. **P**

Are you a UK citizen Yes No

About you and your joint applicant

Please fill in the details opposite with as much information as possible.

Your National Insurance number will be used to confirm your identity when processing your form and when you contact us about your application.

Please provide as many means of contacting you as possible – we may need to contact you at short notice.

Please include as much detail as possible about your house, its number or name, postcode, etc.

Joint applicant

If you want to apply with another person please complete the joint applicant details on the opposite page. They don't have to live with you just now, but we need to know both your circumstances to assess your needs.

We will contact you to discuss your joint applicant's circumstances.

Special communication needs

Please let us know if there are any particular ways we should communicate with you. For example, do you require an interpreter, use of a text phone or large print? If you tick the box at 1.9 we will contact you to offer assistance.

Assistance with your application for housing

You may find dealing with applications difficult. If you want another person to deal with the application for you, such as a member of your family, a friend or a legal adviser, please fill in their contact details at Number 1.11 at the bottom of the opposite page. Members of staff will also be able to assist you with completing the form.

Providing identification and proof of residency

You will be required to provide identification in addition to your National Insurance number. This can include your birth or marriage certificate, driving licence or passport. If you are not a UK citizen, we will need to see your passport in order to be satisfied that you are entitled to apply for social rented housing. We will retain a copy of your passport. Useful information about immigration, asylum and refugees is available at the Shelter Scotland web-site:

www.scotland.shelter.org.uk **P**

UK Government's Visa and Immigration website:

<https://www.gov.uk/government/organisations/uk-visas-and-immigration>

About you

About joint applicant

Only tick the boxes that apply to you.

1.4 Title: First name:

Surname/
Family name:

1.5 Date of birth (DD/MM/YY):

National insurance no:

Nationality:

1.6 Present address and postcode:

Date you moved in here:

1.7 If you are a tenant, please give landlord details

Name:

Address and postcode:

Phone no.

1.8 If you want mail to go to a different address state here

Address and postcode:

1.9 Details of how we can contact you

Phone no 1:

Phone no 2:

E-mail:

Do you have any special communication needs?

1.4 Title: First name:

Surname/
Family name:

1.5 Date of birth (DD/MM/YY):

National insurance no:

Nationality:

1.6 Present address and postcode:

Date you moved in here:

1.7 If you are a tenant, please give landlord details

Name:

Address and postcode:

Phone no.

1.8 If you want mail to go to a different address state here

Address and postcode:

1.9 Details of how we can contact you

Phone no 1:

Phone no 2:

E-mail:

Do you have any special communication needs?

1.10 What is your relationship to the other applicant?

1.11 Representative contact details

Name: Tel no:

Address: Postcode:

2. Previous addresses (not your present address)

If you have lived in your present accommodation for more than 5 years please go to Section 3.

We only need to know about the last 5 years.

However, we will need details of the full five years before you can be added to the list.

If it is less than 5 years, please give us information about where else you have been the tenant or owner, starting with the most recent address. If you are applying with a joint applicant and they have lived somewhere different for the past 5 years, you will need to give us this information also. You can use a separate sheet to give us additional addresses if required. Please include as much information as possible, eg flat number, postcode, etc.

Serving members of **HM Armed Forces** who lived in the Midlothian Council area prior to joining the forces, or who have a spouse or partner who lived in the Midlothian Council area, or where the applicant or family have been resident in Midlothian Council area for at least 3 years while on service will receive Forces points from the date of enlistment.

Please provide written proof of enlistment **P**

Do you live in forces accommodation? Yes No

Where did you live before you joined the forces?

Your previous addresses

2.1 Address (most recent first)

Postcode:

From To

2.2 Reason for leaving

2.3 If tenant: Name and address of landlord

2.4 Address

Postcode:

From To

2.5 Reason for leaving

2.6 If tenant: Name and address of landlord

Joint applicant previous addresses

2.1 Address (most recent first)

Postcode:

From To

2.2 Reason for leaving

2.3 If tenant: Name and address of landlord

2.4 Address

Postcode:

From To

2.5 Reason for leaving

2.6 If tenant: Name and address of landlord

Your previous addresses

2.7 Address

Postcode:

From To

2.8 Reason for leaving

2.9 If tenant: Name and address of landlord

2.10 Have you **ever** held a Midlothian Council or Melville Housing Association tenancy? If so please provide address and dates of your tenancy.

Address:

Postcode

From To

Joint applicant previous addresses

2.7 Address

Postcode:

From To

2.8 Reason for leaving

2.9 If tenant: Name and address of landlord

2.10 Have you **ever** held a Midlothian Council or Melville Housing Association tenancy? If so please provide address and dates of your tenancy.

Address:

Postcode

From To

3. About your household/family

People covered by this section – please include all members of your current household and new household if these differ. Please provide details of anyone who does not live in your house now but who will be moving in with you when you are rehoused. Include any children who do not permanently live with you, but that you have regular overnight access to. **P**

NB: Please provide a copy of each child’s FULL birth certificate or a letter confirming you receive Child Benefit.

A) if you are the main carer please provide a copy of each child’s FULL birth certificate or a letter confirming you receive Child Benefit/Tax Credit.

B) if you have access to your child or children please provide a copy of the FULL birth certificate.

Number of Bedrooms – For each bedroom in your house tell us if it is double or single. Tell us who sleeps in which bedroom. This will help us assess if you are overcrowding or under occupying your present home. Generally, a double bedroom has enough room for a double bed or two single beds. Single rooms generally can only take one single bed or bunk beds.

Requirements for additional rooms – Your circumstances may mean that you need an additional room, for example, to provide care, for medical reasons, for foster children or where a member of your household is pregnant and intends to stay as part of your household once the baby is born. Please give us details about these circumstances in questions 3.10 – 3.12.

Who else do you live with?

Are you living with people who will not be moving with you? Yes No

If yes, who are they?

Name	Age	Male or Female	Relationship to you

How many bedrooms are in your house?

Double

Single

Other household / family members who will be moving with you

NOTE: You have already provided your own details

1. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

2. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

3. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

4. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

5. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

6. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

7. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

8. First Name

Surname/family name

Date of Birth (DD/MM/YY)

Gender

Male

Female

Relationship to you

Relationship to joint applicant

Are they part of your current household?

Yes No

How many nights a week do they stay with you?

Requirements for additional rooms

Please complete all sections that apply to you.

3.10 Is additional room needed to provide regular overnight access to children or for medical or other reasons?

If YES, give details of the arrangement:

3.11 Is additional room needed to provide foster care or do you expect to adopt **P** any children in the future?

(You will need to provide a copy of your approval letter from Social Work).

3.12 Are you or a member of the family moving with you pregnant? Yes No

If so, what is their name?

When is their due date?

DD/MM/YYYY

Have they applied for housing?

Yes No

P (Written confirmation eg MATB1 Form, a letter from the hospital or midwife or a scan photo is required.).

4. About your household's health and wellbeing

Please complete all sections that apply to you.

4.1 Do you or someone moving with you, have a medical problem that means your current accommodation is unsuitable?

Yes No

If no, go to section 5

Medical priorities

If you are awarded a medical priority, then any offer of housing we make must meet the medical criteria. For example, if your medical specifies 'ground floor only' you will not be offered housing on any other floor.

If yes, please complete the following:

About your health

4.2 Which member(s) of your household is affected?

4.3 Does the medical condition make it difficult for you to continue living in your current accommodation? (For example, a member of your family is housebound and cannot get out or uses a wheelchair and the property is not suitable.)

Yes No

4.4 Is the medical condition or illness made worse by your current accommodation and a move would help?

Yes No

4.5 Please give details of the medical condition?

4.6 If you were to describe the condition briefly, what would it be? Please tick all that apply.

- | | |
|--|--|
| <input type="checkbox"/> A physical disability | <input type="checkbox"/> A learning disability |
| <input type="checkbox"/> A sight problem | <input type="checkbox"/> A hearing problem |
| <input type="checkbox"/> Is elderly or frail | <input type="checkbox"/> A drug/alcohol problem |
| <input type="checkbox"/> Terminally ill | <input type="checkbox"/> A mental health problem |

4.7 Please give the name and address of health care professional involved (ie GP, any hospital consultant, social worker, occupational therapist).

Name	Address	Role (GP etc)

Please note that the applicant will be responsible for any costs incurred if a letter of support is needed from any medical practitioner.

4.8 Please tick the type of property you live in

House	<input type="checkbox"/> Detached	<input type="checkbox"/> Semi detached	<input type="checkbox"/> Terraced
Bungalow	<input type="checkbox"/> Detached	<input type="checkbox"/> Semi detached	<input type="checkbox"/> Terraced
Four in block flat	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower	
Tenement flat or maisonette		<input type="checkbox"/> What floor is your flat on?	

4.9 How many stairs are in the house where you live?

Inside

Outside

How many stairs can be easily managed?

4.10 If you use a wheelchair is it for?

Indoors

Outdoors

Both

4.11 Have you had any adaptations carried out at your present home? Yes No

If yes, what are they?

4.12 Are the following within walking distance of your home? Please tick all that apply.

Bus stop

General shop

Post Office

If not, does the household member need to move to be nearer to them? Yes No

4.13 Does your household require car parking? Yes No

4.14 Does the household member have contact with other people?

Everyday

Most but not all days

At least once a week

Never

4.15 Do you feel isolated, insecure or lonely for any other reason? Please give details.

4.16 Please state how rehousing will allow you to cope with your illness or disability?

4.17 Does any member of your household have a medical or health problem which requires you to be housed in a particular type of accommodation?

Yes No

If YES, is it:

A property with no stairs?

A property with particular bathing facilities?

Bath Shower Either

A property with an additional bedroom?

If you have ticked any of the above, please give details.

4.18 Have you applied for housing because you wish to move nearer to a family member in order to give or receive support?

Yes No

If yes, is it to Give Receive

How often is the support needed?

Daily Once a week 2 or 3 times a week Other (please specify)

Please give details of who provides/receives this support, name, address and telephone number.

Points will only be given if there is no-one living locally who could reasonably provide such support.

5. Tenant conduct and household behaviour

5.1 Give details below if any person covered by this application has been the subject of an Antisocial Behaviour Order (ASBO).

Yes No

First name

Surname

Date of birth

Landlord's name

Landlord's phone number

Landlords address

5.2 Give details below if you or any of your household have been evicted for antisocial behaviour in the past 3 years.

Yes No

First name

Surname

Date of birth

Landlord's name

Landlord's phone number

Landlords address

5.3 Give details below if you, or the joint applicant, owes arrears of rent or any other tenancy related debt to any private landlord, housing association or any local authority.

Yes No

Landlord's name

Landlord's phone number

Landlord's address

Name of tenant and address of property

5.4 Give details below if you, or anyone in your household, is required to register with the Police under the Sex Offenders Act 1997.

Yes No

First name

Surname

Date of birth

Violence and harassment

If you suffer from violence and harassment linked to where you live, then please use this section to tell us about your situation. If you have been getting support or have needed assistance from any organisation, please give contact details in the space provided.

If you want to be considered for harassment points, please provide written evidence to support your request **P**

6. Your home

These questions tell us more about where you live. Please tell us if you have any problems with the condition of your home by ticking all of the boxes that apply to your situation.

You will need to include copies of any notifications you have received. Where you cannot provide evidence, we may carry out checks.

6.1 Does your home have:

(Tick all that apply).

A kitchen sink with hot and cold water supply? Yes No

A fixed bath or shower? Yes No

An inside toilet? Yes No

Full central heating? Yes No

Partial central heating? Yes No

6.2 Has an Architect, Engineer or Environmental Health Officer tested the following and found:

(Tick all that apply).

Water supply unsafe **P**

Drainage inadequate **P**

Rising or penetrating damp **P**

Structural instability **P**

Other serious disrepair **P**

6.3 If you are not a Midlothian Council or Melville Housing tenant, have you officially been informed that your present house is going to be demolished?

Yes No **P**

If Yes please provide proof.

7. About the home you need

Please refer to Midlothian Council and Melville Housing Association's allocation policy on how many bedrooms you will be allocated.

One room each for:

- Single person
- Couple
- Single parent
- Pregnant woman, single or part of a couple
- Two children of different sexes under 10
- Two children same sex under 16

Please note that single applicants with children on access qualify for a 2 bedroom property.

Types of house

House – self contained accommodation on one or two levels, usually with own front and back doors.

Tenement flat – accommodation either on all one level internally or maisonette with internal stairs, but can be on any floor within a block of flats with a shared stairwell.

4 in a block – flatted accommodation where you have your own front door, which may be on the ground floor or one floor up.

Wheelchair housing – Specially adapted housing for people who require wheelchair accessible accommodation.

Amenity housing – accommodation which may have some basic adaptations for people who are aged 55+

Retirement housing - Self contained flats with housing support from staff during office hours and 24 hour community alarm service, all at an additional small cost relative to an individual's specific needs.

Sheltered housing – designed with the needs of older people in mind. Self contained accommodation with additional common areas and on-site warden. You should be mobile and capable of self support with or without home help. Most developments are managed by Housing Associations.

Very sheltered housing – similar to Sheltered Housing but will include a care package and meals

Extra care – Housing with Care and Extra Care Housing in Midlothian is provided to enable people with care and support needs to live independently in the community for as long as possible.

Mid market rented housing – accommodation which is available from some housing associations, where you are able to rent property at less than the average cost on the open market.

Low cost home ownership – schemes, such as Shared Equity, which enable people to buy a home in partnership with a housing association. An owner generally pays between 60 and 80 per cent of the price of a home – with the remainder held by a Registered Social Landlord.

Mutual exchange

If you are a Midlothian Council or Melville Housing tenant you can apply to exchange with another tenant so long as they are a Scottish Secure Tenant whose landlord is a local authority, housing association, water or sewage authority.

To view Midlothian Council and Melville Housing properties available for a mutual exchange, view www.homeswapper.co.uk and www.melville.org.uk/moving-home/property-swaps or for further information, please contact the Housing Services Team on **0131 271 3394**

7.1 What size(s) of house would you like to be considered for? (please select one only).

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Bedsit/Studio Flat/1 Bedroom | <input type="checkbox"/> 3 Bedroom |
| <input type="checkbox"/> 1 Bedroom | <input type="checkbox"/> 4 Bedroom |
| <input type="checkbox"/> 2 Bedroom | |

7.2 What types of property would you like to be considered for?
(Tick all that apply)

- House
- Tenement flat
- 4 in a block flat

Note: If you are awarded a medical priority for housing, this may affect the type of house you are offered. Please note you will wait longer if you choose house only.

Please tick all landlords you wish to be considered for

- Midlothian Council
- Melville Housing Association
- Both

7.3 Please tick the types of housing you would like: (Tick all that apply)

- Mainstream housing
- Wheelchair housing
- Amenity housing
- Retirement housing
- Sheltered housing
- Very sheltered housing
- Extra care housing

- Mid market rent
- Low cost home ownership

7.4 Are you moving to the area to take up employment? **P**

Name and address of employer

Contact name and telephone number / email

Homelessness

You may be homeless if:

- you have no home in the UK where you and your family can live together, or
- you have no rights to live in the place you are currently staying, or
- the place where you are currently living is unsuitable or unsafe.

This means that even if you have got somewhere to stay, you may still be regarded as homeless by the council.

'Tied' employment means that your accommodation is provided with your work – if your job ends, you will lose your accommodation as well as your job.

If you are homeless or are likely to become homeless and need further advice, then please contact the Housing Options Team, Buccleuch House, Dalkeith **0131 271 3397**

Email: **homelessness.enquiries@midlothian.gov.uk**

Web: **www.midlothian.gov.uk**

8. Council and housing associations property details

The following pages contain information about rented property which is available in Midlothian and contains information about the areas which have rented housing in them and which landlord has property in the various areas.

Please tick which landlords you would like to be considered for.

Please note that all housing associations apart from Melville Housing, Trust and Viewpoint operate their own lists and you will need to contact them for an application form.

We have agreements with housing associations to nominate applicants for some of their empty properties.

We have agreements with Melville, Trust and Viewpoint to nominate applicants for **ALL** their vacant properties.

Ark Housing Association

The Priory
Canaan Lane
Edinburgh EH10 4SG

Tel: **0131 447 9027**

E mail: **admin@arkha.org.uk**

Website: **www.arkha.org.uk**

Properties: Supported accommodation for people with learning difficulties.

Bield Housing Association

79 Hopetoun Street
Edinburgh EH7 4QF

Tel: **0131 273 4000**

E mail: **info@bield.co.uk**

Website: **www.bield.co.uk**

Properties: Sheltered and very sheltered housing in Bonnyrigg, Dalkeith, Gorebridge and Penicuik.

Castle Rock/Edinvar Housing Association

1 Hay Avenue
Edinburgh EH16 4RW

Tel: **0131 657 0676**

E mail: **customer@castlerockedinvar.co.uk**

Website: **www.castlerockedinvar.co.uk**

Properties: General needs housing for families, couples and single person households, sheltered and very sheltered housing for the elderly and some wheelchair adapted homes.

Dunedin Canmore Housing Association

8 New Mart Road
Edinburgh EH14 1RL

Tel: **0131 478 8888**

E mail: **customer.service@dunedincanmore.org.uk**

Website: **www.canmore-housing.org.uk**

Properties: The Association has a range of single person and family housing in Penicuik and Newtongrange.

Link Housing Association

2C New Mart Road
Edinburgh EH14 1RL

Tel: **0845 155 0019**

E mail: **csc@linkhaltd.co.uk**

Website: **www.linkhousing.org.uk**

Properties: 1 bedroom properties in Penicuik.

Blackwood Housing Association

77 Craigmount Brae
Edinburgh EH12 8XF

Tel: **0131 317 7227**

E mail: **info@mbha.org.uk**

Website: **www.mbha.org.uk**

Properties: Amenity & wheelchair housing in Penicuik.

Melville Housing

The Corn Exchange, 200 High Street
Dalkeith EH22 1AZ

Tel: **0131 654 2733**

E mail: **info@melville.org.uk**

Website: **www.melville.org.uk**

Properties: The Association has a range of single person and family housing with a few special needs/disabled properties.

Midlothian Council

Housing Services
Buccleuch House
1 White Hart Street
Dalkeith EH22 1DE

Tel: **0131 271 3394**

E mail: **housing.enquiries@midlothian.gov.uk**

Properties: The Council has a range of single person, family, extra care, wheelchair and sheltered housing.

Trust Housing Association

12 New Mart Road
Edinburgh EH14 1RL

Tel: **0131 444 1200**

E mail: **info@trustha.org.uk**

Website: **www.trustha.org.uk**

Properties: Extra care housing in Loanhead for applicants who require a care package.

Viewpoint Housing Association

4 South Oswald Road
Edinburgh Lothian
EH9 2HG

Tel: **0131 668 4247**

E mail: **admin@viewpoint.org.uk**

Website: **www.viewpoint.org.uk**

Properties: Sheltered and amenity housing.

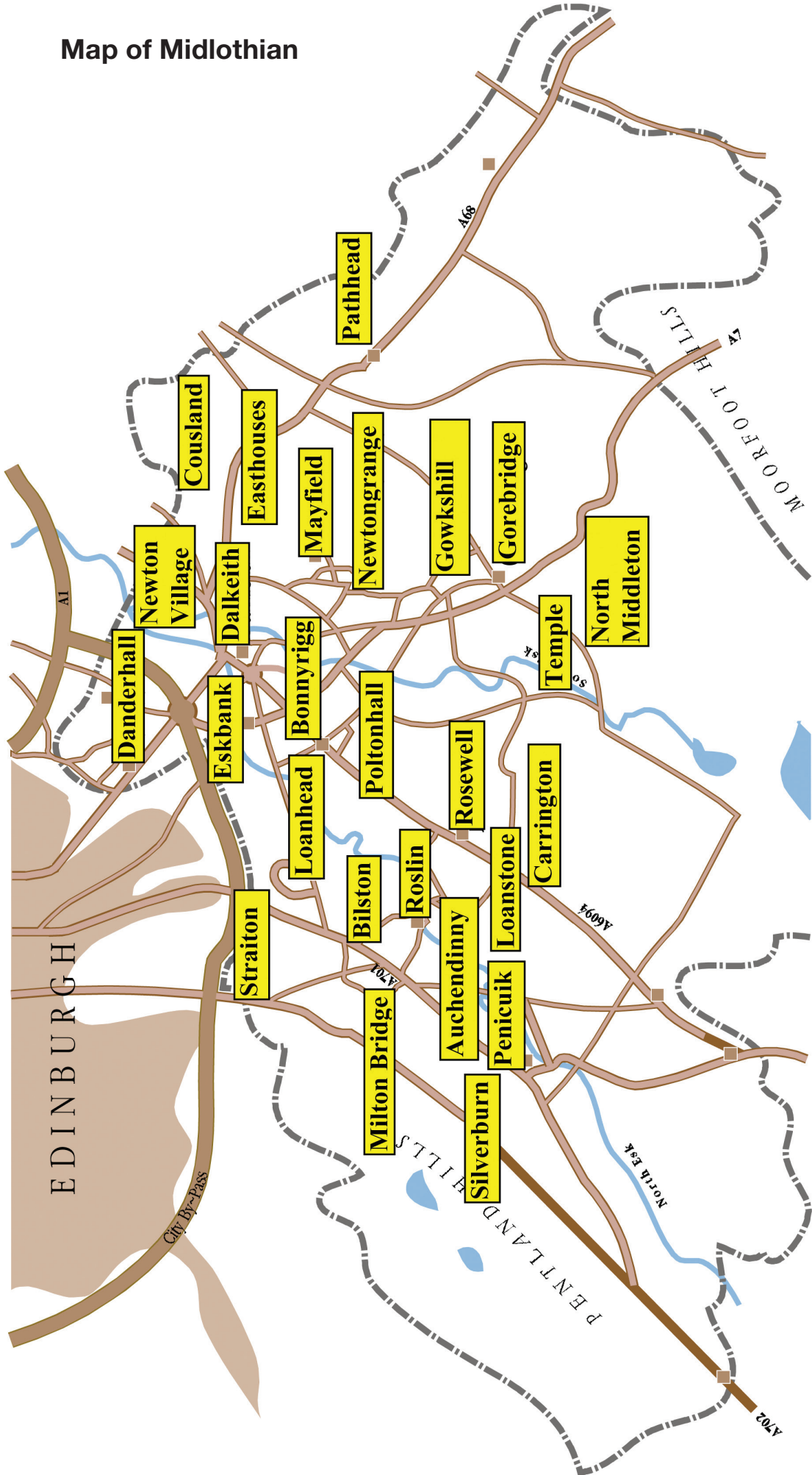
Where would you like to live?

8.1 Please choose carefully as you will only be considered for accommodation in the areas you request. Refer to the map to give you some idea about where the areas are located in Midlothian. The diamond logo on the table below indicates where there is stock available (please tick all that apply).

Letting Area	Tick Please	MC	Melville	CRE	Bield	Viewpoint	Dunedin/Canmore	Link	Margaret Blackwood
Auchendiinny		◆							
Bilston		◆	◆	◆					
Bonnyrigg		◆	◆		◆				◆
Carrington		◆							
Cousland		◆							
Dalkeith		◆	◆	◆	◆	◆			
Danderhall		◆	◆						
Easthouses*		◆	◆						
Gorebridge/ Gowkshill		◆	◆	◆	◆				
Loanhead		◆	◆						
Mayfield*		◆	◆	◆					
Newtongrange		◆		◆			◆		
Newton Village/ Hilltown				◆					
North Middleton		◆							
Pathhead		◆	◆						
Penicuik East		◆							
Penicuik West inc Loanstone & Silverburn		◆	◆		◆		◆	◆	◆
Poltonhall		◆	◆						
Rosewell		◆	◆	◆					
Roslin		◆		◆					
Temple		◆							

* Midlothian Council let Easthouses and Mayfield as one combined area, you cannot choose Easthouses only.

Map of Midlothian



Specialist Housing Options

Wheelchair housing

Angres Court, Danderhall
 Chesters View, Bonnyrigg
 Deanpark Court, Newtongrange
 Easthouses Court, Easthouses

Provider

Midlothian Council
 Midlothian Council
 Midlothian Council
 Midlothian Council

Tick Choice

Amenity housing

Avenue Road, Dalkeith
 Deanpark, Newtongrange
 Harnes Court, Loanhead
 Hunterfield Terrace, Gorebridge
 Regal Lodge, Bonnyrigg
 Roman Camp Way, Pathhead
 Ross Glen Court, Roslin
 St. Annes, Newtongrange

Provider

Viewpoint
 Castle Rock Edinvar
 Castle Rock Edinvar
 Castle Rock Edinvar
 Castle Rock Edinvar
 Castle Rock Edinvar
 Castle Rock Edinvar
 Castle Rock Edinvar

Tick Choice

Retirement housing

Baldwin Court, Penicuik
 Emily Court, Gorebridge
 Moorfoot Court, Bonnyrigg
 Whitehill Lodge, Dalkeith
 Esk Place, Dalkeith

Provider

Bield
 Bield
 Bield
 Bield
 Midlothian Council

Tick Choice

Sheltered housing

Crystalmount, Dalkeith
 Heinsberg House, Penicuik

Provider

Castle Rock Edinvar
 Castle Rock Edinvar

Tick Choice

Very Sheltered housing

Glenesk House, Dalkeith

Provider

Viewpoint

Tick Choice

Extra Care housing

Cowan Court, Penicuik
 Hawthorn Gardens, Loanhead
 Salisbury View, Mayfield

Provider

Midlothian Council
 Trust
 Castle Rock Edinvar

Tick Choice

Please use the checklist below to ensure you have completed all relevant parts of the application form. This will help prevent any delay in your form being processed.

- Have you read, understood and signed the declaration?
- Have you supplied all of the information that we have asked for?
- Have you told us all that we have asked for about your present accommodation and supplied all proof requested?
- Have you completed this form fully?
- If someone is authorised to make enquiries about your application, have you given us their name?

Page Number	Confirmation for	Examples
3	Immigration status	Official document.
4	Proof of identification	Birth or marriage certificate, driving licence, passport, National Insurance number.
6	Proof of HM Forces Enlistment	Official document.
9	Proof of children	Official document.
12	Adoption/Fostering	Letter from Social Work.
12	Pregnancy	MATB1, Letter from Doctor, scan picture.
19	Harassment	Police, landlord or ASB report.
20	Property	Closure Order, Letter from Environmental Health.
20	Demolition	Letter from landlord.
23	Link to the Area	Letter from Employer.
23	Work/Education	Letter from Employer/place of education.

Send us copies of your documents NOT originals.

9. Declaration

9.1 Are you or any of your household related to a member of Housing staff, a Housing Association or Committee Member or a local Councillor?

If NO, please write "no" in the box.

If YES, please complete the details below.

Name of household member

Name of councillor/employee/
staff member/committee member

Relationship

9.2 If you do not complete and sign the section below it may mean that your application cannot be processed or will take longer.

- The details on this form are true.
- I have included the proofs needed.
- I understand that my application will be registered with all landlords I have chosen unless I have stated otherwise in this form.
- I understand that if I have given false information, or withheld any relevant information, my application will be cancelled.
- I understand that I should tell you immediately about any changes in my circumstances that may affect my application for housing.
- I understand that if I get a tenancy using false or incomplete information then the relevant landlord can end the tenancy and repossess the property.

Date of Application

Signature (Applicant)

Signature (Joint Applicant/Spouse/Partner)

Please ensure this form is signed before submitting.

Midlothian Council Privacy Statement

HOUSING APPLICATION FORM

Section 1: Our contact details.

Your personal information is being collected by: Midlothian Council, Housing Service, Buccleuch House, Dalkeith, EH22 1AE, 0131 270 5700.

Section 2: Why we need your personal information?

The personal information we need to collect is required for the purpose of processing and assessing your application for housing.

Midlothian Council is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. We may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information please visit:

www.midlothian.gov.uk/NFI

Should we need to use your personal information for a purpose not named above we will contact you prior to using your information.

Section 3: Legal information

The legal basis for processing the personal information collected in this form is that it is necessary: (1) for the exercise of the Council's Housing function under the Housing (Scotland) Act 1987 and 2001 and related legislation and (2) to comply with the Council's legal obligation to safeguard public funds and to prevent or detect fraud.

This includes the following categories of information;

- Name
- Present and previous address
- Date of birth
- National identifiers such as National Insurance Number
- Details of household members, joint housing applicant, representatives and family members who you will receive support from / provide support to: name; date of birth; address

When we ask you for a special category or sensitive personal information the legal basis for processing is that it is necessary: (1) for the exercise of the Council's Housing function under the Housing (Scotland) Act 1987 and 2001 and related legislation and (2) to prevent or detect fraud.

This includes the following categories of information:

- sexual life, sex or gender
- race or ethnic origin

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- the commission or alleged commission of any offence, or
- any proceedings for any offence committed or alleged to have been committed, the disposal of such proceedings or the sentence of any court in such proceedings
- physical or mental health or condition
- religion or other beliefs of a similar nature
- history anti-social behaviour / conduct
- housing debt
- name and address of employer and / or further education provider
- adoption and fostering arrangements
- medical information

Section 4: Sharing and transfer

To provide the required service we may need to share your personal information with the following internal services and external bodies;

- Internal Council services including Housing Revenues, Social Work (including Children's Services, Adult Services, Criminal Justice and Occupational Therapy), Environmental Health
- Police: where appropriate and associated with assessing application for housing
- Housing Associations and other Registered Social Landlords: where appropriate and associated with assessing application for housing
- As indicated in section 2 above, the Council may also share your personal information internally and externally with other bodies responsible for auditing or administering public funds for the prevention and detection of fraud.

Section 5: Transfers outside of the UK

Your personal information will not be transferred outside of the UK.

Section 6: How long will we keep your personal information? (Records retention)

This information will be kept in accordance with the Council's retention schedule that can be found at www.midlothian.gov.uk

Section 7: Your rights under the Data Protection Act 1998.

You can find more information on the Data Protection Act and the rights which you have under that Act on the web site of the Office of the Information Commissioner (ICO) at **www.ico.gov.uk**.

It is important to be aware that from 25th May 2018 the General Data Protection Regulation (GDPR) creates some new rights for individuals and strengthens some of the rights that currently exist under the DPA.

The GDPR provides the following rights for individuals under certain circumstances. Please note that not all of these rights apply for Housing Applications:

- 1.** The right of access
- 2.** The right to rectification
- 3.** The right to erasure
- 4.** The right to restrict processing
- 5.** The right to data portability
- 6.** The right to object
- 7.** Rights in relation to automated decision making and
- 8.** The right to be informed

If you are unhappy with the way we have processed your personal data you have the right to complain to the ICO but you should raise the issue with us first by contacting us as follows:

By email: **DPO@midlothian.gov.uk** or by phoning us on **0131 561 5444** we also have a freepost address:

Freepost SC05613

Dalkeith

Midlothian

EH22 0BR

Equality Monitoring Form

You can choose to answer all or just some of the questions.
No names or addresses are required on this form.

Category	Sub Division	Please Tick ✓	
		You	Joint Applicant
Gender			
	Female	<input type="checkbox"/>	<input type="checkbox"/>
	Male	<input type="checkbox"/>	<input type="checkbox"/>
Disability			
	None	<input type="checkbox"/>	<input type="checkbox"/>
	Physical or Motor Impairment	<input type="checkbox"/>	<input type="checkbox"/>
	Mental Health Issue	<input type="checkbox"/>	<input type="checkbox"/>
	Learning Disability	<input type="checkbox"/>	<input type="checkbox"/>
	Hearing Impairment - Partial	<input type="checkbox"/>	<input type="checkbox"/>
	Hearing Impairment - Total	<input type="checkbox"/>	<input type="checkbox"/>
	Visual Impairment - Partial	<input type="checkbox"/>	<input type="checkbox"/>
	Visual Impairment - Total	<input type="checkbox"/>	<input type="checkbox"/>
	Communication Difficulties	<input type="checkbox"/>	<input type="checkbox"/>
	Multiple Disabilities	<input type="checkbox"/>	<input type="checkbox"/>
	Other Chronic illness or disability	<input type="checkbox"/>	<input type="checkbox"/>

Category	Sub Division	Please Tick ✓	
		You	Joint Applicant
Ethnic Background			
White	Scottish	<input type="checkbox"/>	<input type="checkbox"/>
	Other British	<input type="checkbox"/>	<input type="checkbox"/>
	Irish	<input type="checkbox"/>	<input type="checkbox"/>
	Polish	<input type="checkbox"/>	<input type="checkbox"/>
	Gypsy/Traveller	<input type="checkbox"/>	<input type="checkbox"/>
	Any other white background	<input type="checkbox"/>	<input type="checkbox"/>
Mixed	Any mixed background	<input type="checkbox"/>	<input type="checkbox"/>
Asian	Asian Scottish/British Indian	<input type="checkbox"/>	<input type="checkbox"/>
	Asian Scottish/British Pakistani	<input type="checkbox"/>	<input type="checkbox"/>
	Asian Scottish/British Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>
	Asian Scottish/British Chinese	<input type="checkbox"/>	<input type="checkbox"/>
	Asian Scottish/British Other	<input type="checkbox"/>	<input type="checkbox"/>
Black	Black Scottish/British African	<input type="checkbox"/>	<input type="checkbox"/>
	Black Scottish/British Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
	Black Scottish/British Other	<input type="checkbox"/>	<input type="checkbox"/>
Other Background	Arab	<input type="checkbox"/>	<input type="checkbox"/>
	Arab Scottish	<input type="checkbox"/>	<input type="checkbox"/>
	Arab British	<input type="checkbox"/>	<input type="checkbox"/>
	Any other ethnic background	<input type="checkbox"/>	<input type="checkbox"/>

