

LEEDS HOMES MEMBERSHIP AMENDMENT FORM



Your Application Number:.....

If you are adding a joint applicant a new application form must be completed.

If you want to add more people to be rehoused onto your housing application you will need to provide recent original proofs of identity and address along with the amendment form into your nearest housing office or One Stop Centre, if you live outside Leeds we will accept photocopies. For anyone under the age of 16 we require a copy of their birth certificate and recent proof of child benefit or child tax credits letters.

Please do not send original documents through the post.

1. Please list everyone living in the property with you. (Continue on an extra sheet if necessary)

Title	Sex		First Name	Last Name	Date of Birth	Relationship to you	Are they currently living with you?
	Male	Female					
Main:					/ /		
Joint:					/ /		
					/ /		
					/ /		
					/ /		
					/ /		

2. If any member of your household is pregnant please give their names and due date. If they are to be rehoused with you we will need to see proof. This can be a MATB1 letter from the midwife, personal maternity record or pregnancy scan which must include name, date of birth and estimated date of childbirth.

Full Name	Due Date
	/ /

3. Please confirm your contact details

	You	Joint Applicant
Mobile phone number		
Telephone number		
E-mail address		

4. Please confirm your address. If you have recently moved please provide proof.

Your current address	Your previous address
Postcode	Postcode
Date moved in: / /	Date moved: / /

5. Please tick one box that best describes the type of building you live in now. ✓

House	<input type="checkbox"/>	Bungalow	<input type="checkbox"/>
Maisonette	<input type="checkbox"/>	Bedsit	<input type="checkbox"/>
Flat	<input type="checkbox"/>	Sheltered accommodation	<input type="checkbox"/>
High-rise flat	<input type="checkbox"/>	Other, please specify:	<input type="checkbox"/>

6. Please tick one box that best describes the type of home you live in now. ✓

Leeds City Council tenancy	<input type="checkbox"/>	Hospital	<input type="checkbox"/>
Housing Association tenancy	<input type="checkbox"/>	Hostel	<input type="checkbox"/>
Other local authority tenancy	<input type="checkbox"/>	Prison/Youth Offending Institute	<input type="checkbox"/>
Private rented tenancy	<input type="checkbox"/>	Lodger	<input type="checkbox"/>
Owner occupier with a mortgage	<input type="checkbox"/>	Mobile home	<input type="checkbox"/>
Owner occupier without a mortgage	<input type="checkbox"/>	No fixed address	<input type="checkbox"/>
Living with friends	<input type="checkbox"/>	Sleeping rough	<input type="checkbox"/>
Living with parents/relatives	<input type="checkbox"/>	Supported housing	<input type="checkbox"/>
Bed and breakfast	<input type="checkbox"/>	Tied accommodation	<input type="checkbox"/>
Care home	<input type="checkbox"/>	NASS accommodation	<input type="checkbox"/>
H.M. Armed Forces	<input type="checkbox"/>	Other, please specify:	<input type="checkbox"/>

7. How many bedrooms are there?

Are there any other changes to your application, please provide further details, e.g; Overcrowding or homelessness or any other issues with your tenancy.

(Continue on another sheet if necessary)

8. Please tick your household's combined annual gross income band. ✓

Up to £15,000	<input type="checkbox"/>	£25,000 - £34,999	<input type="checkbox"/>
£15,000 - £24,999	<input type="checkbox"/>	Over £35,000	<input type="checkbox"/>

9. Declaration

- I/we confirm that the information I/we have given on this form is correct and understand it is an offence to withhold or give false information. I /we agree to tell you about any change in information which I/we have given you.
- I/we have provided the information so that you may update the information already held on the Leeds Homes Register.
- I consent to you using the information to detect and prevent fraud and share it with other organisations, agencies and private landlords.

Signed (Main Applicant)	<input type="text"/>	Date	/	/
Signed (Joint Applicant)	<input type="text"/>	Date	/	/