



## MEMBERSHIP FORM



**If you require this form in Large Print,  
Braille, Audio Tape or CD, please contact the  
Leeds Homes Team on 0113 247 6313.**

Translations	Yes ✓	No ✓
Do you require translation?		
If 'Yes', which language?		

<p><b>English</b> If you need help filling in this form, please contact your local housing office.</p>	<p><b>Hindi</b> यदि आपको इस फार्म भरने में सहायता की जरूरत हो तो कृपया आपकी स्थानीय हाउसिंग ऑफिस से मदद के लिए मांग करें।</p>
<p><b>Arabic</b> إذا احتجتم لمساعدة لملء وتعبئة هذه الاستمارة؛ الرجاء طلب المساعدة من مكتب إسكانكم المحلي.</p>	<p><b>Kurdish</b> گەر بپێویستت بە هاوکاری ههیه له پرکردنهوهی ئەم فۆرمه دا، تکایه داوای یارمهتی له ئۆفیسێ خاڵوو بهر دهی (هاوسین ئۆفیس) ناوجه کهی خۆت بکه.</p>
<p><b>Bengali</b> এই ফরমটি পূরণ করতে যদি আপনার সাহায্যের দরকার হয় তাহলে দয়া করে আপনার স্থানীয় হাউজিং অফিসে সাহায্য চান।</p>	<p><b>Portuguese</b> Se precisar de ajuda para preencher este formulário, queira pedir esta ajuda no Escritório dos Serviços de Habitação da sua área.</p>
<p><b>Chinese</b> 如需協助填寫這份表格者 請前往該區房屋服務辦事處求助</p>	<p><b>Pushto</b> که چرته تاسو ته ده ده فارم په مکمل کولو کېنه ده مدد ضرورت وی نو بهرینای اوکړئ او خپل مقامی هاؤسنگ آفس کېنه ده مدد ده پاره تپوس اوکړئ.</p>
<p><b>Dari</b> اگر شما برای تکمیل کردن این فورمه ضرورت به کمک دارید، لطفاً از اداره مسکن محلی خود تقاضای مساعدت کنید.</p>	<p><b>Punjabi</b> ਜੇਕਰ ਤੁਸੀਂ ਇਸ ਫਾਰਮ ਨੂੰ ਭਰਨ ਲਈ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਅਸਲੇ ਮੁਕਾਬਲੇ ਵਾਲੇ ਆਫਿਸ ਵਿਚ ਸਹਾਇਤਾ ਲੈਣ ਲਈ ਜਾਓ।</p>
<p><b>Farsi</b> اگر شما برای تکمیل این فرم نیاز به کمک دارید، خواهشمند است که از اداره مسکن محلی خود درخواست کمک نمایید.</p>	<p><b>Vietnamese</b> Nếu bạn cần sự giúp đỡ để hoàn thành lá đơn này, hãy vui lòng hỏi tới sự giúp đỡ tại văn phòng nhà cửa ở địa phương bạn.</p>
<p><b>French</b> Si vous avez besoin d'aide pour remplir ce formulaire, adressez-vous au Bureau de Logement (housing office) le plus proche.</p>	<p><b>Urdu</b> اگر آپ کو یہ فارم مکمل کرنے میں مدد درکار ہے تو ہماری معاونت کیلئے اپنے مقامی ہاؤسنگ آفس (دفتر مکانات) سے رجوع کریں۔</p>
<p><b>Polish</b> Je eli potrzebuj Pa stwo pomocy w wypełnieniu tego formularza, prosimy o skontaktowanie si ze swoim lokalnym urz dem mieszkaniowym.</p>	<p><b>Tigrinya</b> እዚ ቕጽ ንምምላእ ኣገዝ ምስ እትደልዩ ኣብ ጥቓኡም ንዘሎ ቤት ጽሕፈት ኣባይቲ ክትውከሱ ትከእሉ ኢኹም።</p>

# EQUALITY MONITORING

## This information will not affect your registration

We want to make sure that all our services are fair and accessible to all. We are asking you the following questions so that we can make sure that our services include everyone's needs.

The information you provide will be kept confidential.

We will use your answers to produce statistical information that the Council will use to check the fairness of any services you receive. This information will only be used by Leeds City Council or shared with Education Leeds, the Leeds Arms Length Management Organisations and the Belle Isle Tenant Management Organisation. They will only use this information for the same purposes as the Council.

You do not have to answer these questions, and if you choose not to this will not affect your registration or the service you receive.

### What group below do you feel best describes your ethnic background?

#### A. White

British

Irish

Any other White background please write

#### B. Mixed Race

White and Black Caribbean

White and Black African

White and Asian

Any other Mixed background please write

#### C. Asian or Asian British

Indian

Pakistani

Bangladeshi

Kashmiri

Any other Asian background please write

#### D. Black or Black British

Caribbean

African

Any other Black background please write

#### E. Other ethnic groups

Chinese

Gypsy/Traveller

Any other background please write

### What is your Faith/Religion?

Buddhist

Christian

Hindu

Jewish

Muslim

Sikh

No Religion

Other (please specify)

### Do you consider yourself to be disabled?

Yes

No

### What is your sexuality?

Straight/Heterosexual

Lesbian/Gay woman

Gay Man

Bisexual

# 1. INFORMATION ABOUT YOU

It is essential that you answer all the questions in the following sections, otherwise, we will not be able to register your application. If someone else is applying with you, as a joint applicant, please fill in their details as well.

A. Your household	You	Joint applicant
Title (Mr, Mrs, Miss, Ms and so on)		
Sex (Male or Female)		
First name		
Middle name (if you have one)		
Last name		
Previous name (if this applies)		
Date of birth	/ /	/ /
Relationship to you (for example, wife, husband, partner, civil partner, friend)		
Current address and postcode		

B. Contact phone numbers	You	Joint applicant
Day time phone number		
Home phone number		
Mobile phone number		
E-mail address		

C. National Insurance Number	You	Joint applicant

## 2. NATIONALITY

A. What is your and the joint applicant's nationality?	You ✓	Joint applicant ✓	
United Kingdom Citizen (living in the UK)			
United Kingdom Citizen (returning from overseas)			
Bulgarian			
Czech			
Estonian			
Hungarian			
Latvian			
Lithuanian			
Polish			
Romanian			
Slovakian			
Slovenian			
Other European Economic Area (EEA)* country			
Any other nationality			

\*Other European Union (EEA) countries:

Austria

France

Italy

Netherlands (Holland)

Belgium

Germany

Liechtenstein

Portugal

Cyprus

Greece

Luxembourg

Spain

Denmark

Iceland

Malta

Sweden

Finland

Ireland

Norway

B. Have you, or anyone who will be rehoused with you, come to live in the UK in the last 5 years or are you/they subject to immigration control?	Yes ✓	No ✓
If 'Yes', please list their names		

### 3. OTHER MEMBERS OF YOUR HOUSEHOLD

**A. Please list everyone who **will** be rehoused with you.** (Continue on an extra sheet if necessary)

Title	Sex		First Name	Last Name	Date of Birth	Relationship to you
	Male	Female				
					/ /	
					/ /	
					/ /	
					/ /	
					/ /	
					/ /	
					/ /	

**B. If you are living with people who **won't** be rehoused with you, please give their details below.** (Continue on an extra sheet if necessary)

Title	Sex		First Name	Last Name	Date of Birth	Relationship to you
	Male	Female				
					/ /	
					/ /	
					/ /	
					/ /	

**C. If you or any member of your household is pregnant please give their names and due dates.** (Continue on an extra sheet if necessary)

Name	Due Date
1	
2	
3	

**D. Do you have legal access to children who **won't** be rehoused with you?**

Yes ✓	No ✓
<input type="checkbox"/>	<input type="checkbox"/>

If 'Yes', how many children?

How often each month will they stay with you?

## 4. WHERE YOU LIVE NOW

### A. 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	<input type="checkbox"/>	Supported Housing	<input type="checkbox"/>
Bed and breakfast	<input type="checkbox"/>	Tied accommodation	<input type="checkbox"/>
Care Home	<input type="checkbox"/>		<input type="checkbox"/>

### B. What type of building is your current home?

		✓	✓
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"/>		<input type="checkbox"/>

Other, please specify:

C.	How many bedrooms are there?	
D.	When did you move into your current home?	
E.	If you are an owner occupier what is the estimated value of the property?	
F.	If you have a mortgage who is this with?	
F.	Approximately how much of your mortgage is left to be paid?	

## 5. REASONS FOR WANTING TO MOVE

Do you want to be rehoused for any of the following reasons:

A. Have you been served with a Notice Seeking Possession?	Yes ✓	No ✓
If 'Yes', please send us a copy of the notice.		
B. Have you been served with a Warrant for Eviction?	Yes ✓	No ✓
If 'Yes', please send us a copy of the notice.		
C. Are you unable to afford to pay your rent or mortgage?	Yes ✓	No ✓
If 'Yes', please explain why?		
D. Is your home no longer suitable to meet your, or a member of your household's, health or mobility needs?		
E. Are you, or a member of your household, disabled and require an adapted property?	Yes ✓	No ✓
F. Are you elderly and require sheltered housing with support from a warden?	Yes ✓	No ✓
If you have answered 'Yes' to D, E or F please explain why?		
G. Are you a young person leaving the care of the local authority?	Yes ✓	No ✓
If 'Yes', who is your social worker?		
H. Have family or friends asked you to leave?	Yes ✓	No ✓
If 'Yes', how soon must you leave?		

Do you want to be rehoused for any of the following reasons:

I.	Does your home lack basic facilities such as hot and cold running water, or is your home in a poor state of repair?	Yes ✓	No ✓
J.	Are you experiencing violence or harassment which means you can no longer live in your current home?	Yes ✓	No ✓
K.	Are you leaving hospital/residential care?	Yes ✓	No ✓
L.	Are you leaving the Armed Forces?	Yes ✓	No ✓
M.	Have you been asked to leave tied accommodation, (accommodation provided as part of your job)?	Yes ✓	No ✓

If 'Yes', how soon must you leave?

N. Are there any other reasons why you want to be rehoused?  
Please explain the reason(s) below.

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O.	Do you want to move to Leeds from another area?	Yes ✓	No ✓
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If 'Yes', do you or any member of your household want to move for any of the following reasons:

Connection	✓	
Family Connection		Please give details below of names, addresses and your relationship to family members to show why you have a connection to Leeds.
To give support		
To receive support		
Employment		
Other reason		

Details:

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## 6. WHERE YOU USED TO LIVE

It is essential that you tell us where you have been living for the past 5 years. Without this information we cannot register your application.

If you or the joint applicant haven't lived in your current home for the last 5 years, please tell us all the addresses where you or they have lived. Include any time you have spent living with your parents, in hospital, in prison, in another country and so on. Start with the most recent address first. Please continue on an extra sheet if necessary.

	You	Joint applicant
Address		
When did you move in?	/ /	/ /
When did you move out?	/ /	/ /
Who owned this accommodation? (for example, a council or a housing association, private landlord, parents)		
If you rented this address, what was your landlord's name and address?		
	You	Joint applicant
Address		
When did you move in?	/ /	/ /
When did you move out?	/ /	/ /
Who owned this accommodation?		
If you rented this address, what was your landlord's name and address?		
	You	Joint applicant
Address		
When did you move in?	/ /	/ /
When did you move out?	/ /	/ /
Who owned this accommodation?		
If you rented this address, what was your landlord's name and address?		

We may contact your previous landlords for a reference.

## 7. INFORMATION ABOUT YOUR FINANCES AND ASSETS

**A. If you are employed what is your household's combined yearly salary (before tax)?**



Up to £15,000

£15,000 - £24,999

£25,000 - £35,000

Over £35,000

**B. Do you or the joint applicant receive benefits?**

Yes ✓

No ✓

If 'Yes', please give details

You ✓	Joint applicant ✓	Type of benefit	Amount £	How often

**C. Do you or the joint applicant have any savings or investments worth over £6000?**

Yes ✓

No ✓

**D. Do you, or any other person who will be rehoused with you, own any other property either in the UK or abroad?**

Yes ✓

No ✓

If 'Yes', who owns this property?

What is the address?

What is the estimated value of the property?

## 8. WHERE WOULD YOU LIKE TO LIVE

**A. Please name one area where you would most prefer to live. You may also provide two other choices. Please refer to the list below.**

You will still be able to bid for any of the homes we advertise.

1.

2.

3.

### List of Locations:

Aberford

Adel

Alwoodley

Armley

Bardsey

Barwick in Elmet

Beeston Hill

Belle Isle

Boggart Hill

Boston Spa

Bramham

Bramhope

Bramley

Burley

Burmantofts

Calverley

Chapel Allerton

Chapeltown

Clifford

Collingham

Cookridge

Cross Gates

Drighlington

East Keswick

East/ West Ardsley

Ebor Gardens

Farnley

Garforth

Gildersome

Gipton

Great Preston

Guisley

Halton Moor

Harehills

Harewood

Hawthorn

Headingley

Holbeck

Horsforth

Hunslet

Hyde Park

Ireland Wood

Kippax

Kirkstall

Ledston

Lincoln Green

Little London

Meanwood

Methley

Micklefield

Middleton

Moortown

Morley

New Farnley

Osmondthorpe

Otley

Pool

Pudsey

Rawdon

Richmond Hill

Robin Hood

Rodley

Rothwell

Roundhay

Scarcroft

Scholes

Seacroft

Shadwell

Stanningley

Swarcliffe

Swillington

Temple Newsam

Thorner

Thorp Arch/Walton

Thorpe

Weetwood

Wetherby

Wortley

Yeadon

**B. If you are a council or housing association tenant, you have the right to apply for an exchange with another tenant. If you want to exchange your home with another tenant, we can provide free advertising and a computer matching service to put you in touch with each other.**

Would you consider a mutual exchange?

Yes ✓

No ✓

## 9. YOUR SUPPORT NEEDS

<b>A. Are you currently receiving support from an agency?</b>	Yes ✓	No ✓
If 'Yes', what is the name and contact details of your support worker?		
Name		
Agency		
Phone number		
Address		
email		
<b>If 'No', would you like to discuss supported housing options?</b>	Yes ✓	No ✓
<b>B. Would you like help bidding for properties or finding out about our available homes?</b>	Yes ✓	No ✓

## 10. FOR SOMEONE TO ACT ON YOUR BEHALF

If you would like to give permission for someone else, such as a relative or a support agency, to bid for homes on your behalf, complete the 'Advocate details' below. You will be giving us your consent to share the information we hold on your housing application with the person or organisation you specify.

### Advocate details:

Name	Phone number
Address	
Agency (if this applies)	
Relationship to you	
You can withdraw this permission at any time by notifying any one-stop centre or housing office.	

## 11. RELATIONSHIPS

Are you employed by or related to an employee of any of the following:

Leeds City Council, a Leeds City Council Arms Length Management Organisation and the Belle Isle Tenant Management Organisation. A housing association that is part of the Leeds Homes register. An elected councillor of Leeds City Council. A member of a Leeds Homes register housing association committee or board?

Yes ✓

No ✓

If 'Yes', what is their name(s)?

## 12. DECLARATION

### Data Protection Act

The information you provide on this form is treated in the strictest confidence and is protected under the Data Protection Act 1998. It will be stored on computer and in paper records and will not be kept for longer than is necessary. Once you cease to receive services from Leeds Homes your information will be destroyed.

Under the Data Protection Act, you have a right to see information kept on file about your application and to ask for any inaccurate information to be destroyed.

All the information you give us will be placed on the Leeds Homes Housing Register. By signing the Declaration you agree to Leeds Homes sharing this information with housing associations or other landlords who could help rehouse you.

In exceptional circumstances we may share your information without consent where there is a legal requirement to do so. This would include:

- For child protection purposes
- To prevent or detect a crime, or apprehend offenders
- By order of court

I/We confirm that the information I/we have given on this form is correct and understand that it is an offence to withhold or give false information.

I/we agree to tell you about any changes in the information I/we have given you.

I/we understand that any information given by me/us relating to my/our registration will be placed on the Leeds Homes Housing Register and may be viewed by any landlord who takes part in the scheme either now or in the future. This information will only be retained by them if they are going to provide me/us with accommodation.

We may use the information to detect and prevent fraud and share it with other organisations, agencies and private landlords.

Your signature:

Date:

Joint applicant's signature:

Date:

## 13. ADDITIONAL DOCUMENTATION

Please check that you have included all relevant documentation, without this your application cannot be processed.  
**DO NOT SEND ORIGINAL DOCUMENTS AS WE ARE UNABLE TO RETURN THEM.**

Documentation	✓
<b>Pregnancy.</b> If you, the joint applicant or other members of your household are pregnant, have you enclosed confirmation of the pregnancy – <b>Mat B1 form</b>	
<b>Immigration Status.</b> If you have come to live in the UK in the last 5 years have you included the necessary documentation – <i>for example passport, leave or right to remain in the UK, Worker's Registration documentation?</i>	
<b>Signatures.</b> Have you and the joint applicant signed and dated the form?	

### How to contact us

**Write to us:**

Leeds Homes Team, Environment and Neighbourhoods, Leeds City Council,  
Merrion House, Merrion Centre, Leeds LS2 8BB

**Phone:** 0113 247 6313   **Email:** leeds.homes@leeds.gov.uk   **Web:** www.leedshomes.org.uk

**Please return this form to your local housing office, one stop centre or post it to the address above.**

**For our use**

Customer's name:	
Address:	
Verified by:	
Status:	
Name and Office:	
LHR number:	

**LHR Verification Form**

	Yes ✓	No ✓	N/a ✓
Signed by main applicant:			
Signed by joint applicant:			
Full 5 year housing history supplied:			
One area of choice selected:			
Eligibility issues (Nationality)			
Live application:			
Cancelled application:			
Reinstated:			

**Person Database Information**

	Person Number	Thorough search of Person Database carried out but not found
Main applicant:		
Joint applicant:		
Additional household members:		
1.		
2.		
3.		
4.		
5.		
6.		

**Date stamp:**

July 2008