Housing Waiting List

Southern Region

Application Form and Guidance Notes

July 2023 Rev 1.0

Housing Application Part 1 - Guidance Notes

Part 1 of this form should be treated as guidance only for completion of the waiting list application form.

You may also qualify to be included on The First Time Buyers List. Inclusion on this list will not prevent you from being on the Public Sector Housing waiting list, and you should contact the Department of Infrastructure Customer Services team for more information (01624) 685955.

Please read these notes **prior** to completing the application form.

1. Acceptance Criteria

- The normal residential qualifications for acceptance on the waiting list and/or allocation of accommodation are:
 - a) Minimum of 10 years residence in the Isle of Man; and
 - b) Minimum of 3 years residence in the area of the combined housing waiting list
- The residential qualifications do not need to be continuous or immediately prior to the application. (but you will be required to provide proof of residence).
- Your gross annual income must not exceed the amounts specified in the following table.

Number of dependent children	Maximum gross annual income			
	Single applicant	Joint applicant		
None	£34,500	£38,000		
1 child	£40,000	£43,500		
2 children	£43,500	£47,000		
3 or more children	£47,000	£50,500		

• At least one of the applicants must be 18 years of age.

2. Allocation Criteria

- With regard to the allocation of properties a points system is applied to every housing application.
- The aim of the points system is to assess each applicant by a common set of standards to prioritise their in relation to their housing needs.

3. Application Form

- The application form should be completed in block capital letters.
- All questions **must** be answered. (If the answer is "none" state "none" or if not applicable state "n/a"). Or enclose relevant supporting documentation.
- **Failure** to complete any part of the application form **will** result in the form being returned to the applicant without consideration.

 You should include details of all addresses and years of residence at previous addresses you have lived in, as failure to do so could affect your housing points and increase your waiting time.

Question 1 – Applicant Details

• In order to be considered, the full name of all applicants must be given.

Question 2 – Applicant's Status

- If you are married, or intending to live as a couple, your application will be joint and any tenancy offered will be joint if both applicants are residentially qualified.
- If your applicant is a joint application, both incomes will be jointly assessed.

Question 3 – Current Address

• You must provide a current utilities bill, bank statement, or similar documentation showing your present address when submitting your application.

Questions 4 and 5 - Date/Place of Birth

• You must provide original or certified copies of birth certificates for each applicant and any other persons requiring housing with you.

Question 6 – Number Of Years Resident On The Island.

- Details must include all addresses, and whenever possible the dates of residency should include month and year (e.g. May 2005).
- You may be asked to supply some proof of your previous addresses.

Question 7 – Number of Years Resident in the Housing Area.

• The total time residing in the regional area which falls within the boundaries of the combined housing waiting list need not be continuous or immediately prior to the application but must total three years or more.

Questions 8 and 9 - Occupation and Employer

- You will be required to submit a minimum of three most recent payslips to support your application.
- If you are self-employed you should note that it is not permitted to carry on any trade, profession or business from a public sector property without written approval from the Department of Infrastructure or Local Authority (the 'housing providers').

Question 10 – Weekly Income

- Income is based on all gross annual income (this is before tax and deductions). The applicant(s) must submit at least three recent wage/salary slips, in respect of each of the applicants, as evidence of income, plus proof of any benefits, including child benefits, and/or pensions.
- If you are self-employed you will need to show your previous two years' audited accounts. If audited accounts are unavailable, please submit copies of your income tax assessment(s). You may be required to provide authority to approach the tax office for confirmation of proof of income.
- Where an applicant is in receipt of benefits, a copy of the most recent award letter must be provided. Submission of the application form implies approval for the housing providers to approach Social Security to verify details of any benefits received by the applicant(s).

Question 11 - Savings

- You must provide details of <u>all</u> your savings and any investments which you or your partner may have.
- This should include the proceeds of sale of a previous property whether solely or jointly owned.

Questions 12 and 13 – Other Persons Requiring Accommodation/Housing

You must provide original or certified copies of birth certificates for each applicant and any other
persons requiring housing with you. Children aged between 18 and 21 who are in full time
education may be considered as part of the household.

Question 14 – Accommodation Required (Refer to attached map)

- It is important you think carefully about where you would like to live, as **unjustified refusal** of a property offered will result in a deduction of housing points.
- Please indicate clearly the areas you wish to be considered for in Question 14. Also refer to the map on page 16 for guidance. Applicants may have up to 4 choices according to their housing need.
 - 1) Anywhere in the South of the Island
 - 2) A specific Parish or Parishes in the South up to 3 choices
 - 3) A choice of 2 parishes outside of the Southern Region
 - 4) Anywhere on the Island

Note: if you indicate a preference for a Parish and subsequently reject an offer of accommodation without good reason, you may have points deducted for unjustified refusal.

For	exam	ın	le:
	CAGII		•

An applicant wishes to be offered a property from anywhere in the southern region *	Tick the box " I will live anywhere in the South" only You will then be considered for all 6 Southern Parishes.
An applicant wishes to be offered a property from anywhere in the southern region but has a preference for where they would like to live.	 Tick the box "I will live anywhere in the South" Complete Choice 1 through to Choice 3 in order of priority to you. For example – 1st preference: Castletown, 2nd Malew, 3rd Rushen,4th Port St.Mary.
An applicant wishes only to be offered a property from a selection of parishes of their choosing within the southern region.	 Do NOT tick the box "I will live anywhere in the South" Complete Choice 1 through to Choice 3 in order of priority to you. Choice 1 only where you have only one selection, Choice 1 and Choice 2 for 2 selections etc
An applicant would additionally consider a DOI property outside the southern region	 Refer to the map on page 16 for other parishes shown in white (numbered 1-11) and complete the section for Parish 1 or Parish 2 For example – 1st preference: Bride, 2nd Jurby
An applicant would be prepared to be offered a DOI property anywhere on the island	Tick the box " I will live anywhere on the Island"

Question 15 – Present Accommodation

- You must produce your rent book if you are currently in, or have recently left rented accommodation. If you do not have a rent book, then please provide the name and address of your landlord.
- As part of the assessment process an Officer from any of the housing providers, or other agency, e.g. Environmental Health, may be required to carry out an inspection of your present accommodation to evaluate any particular difficulties relating to such accommodation.
- The submission of the application form will imply approval to such an inspection which, if necessary, will be arranged at a mutually convenient time.

Question 16 – Details of Property Ownership

- Owners/occupiers (existing or recent) are not automatically barred from applying for public sector housing; however, the applicant(s) will need to satisfy the housing provider that they have an urgent and compelling need to be rehoused and are not in a financial position to provide their own private accommodation.
- If you are still living in the property or still co-own the property but are not living in it, you must provide a recent valuation of the property, along with proof of any mortgages and/or charges against the property.
- An applicant shall not be selected by a housing authority for allocation of general needs public sector housing if the applicant or either of the joint applicants owns residential accommodation in any jurisdiction.
- If the applicant, or either of the joint applicants, owns residential accommodation in any jurisdiction, the applicant may nevertheless be accepted for inclusion on the relevant housing authority's housing waiting list for general needs public sector housing providing all of the following conditions are satisfied prior to allocation.
- The premises are unsuitable for occupation by the applicant, the premises are being actively marketed with a view to disposal, disposal is anticipated within six months of allocation (further information will be required).
- The sum of any savings or assets available to the applicant, along with the outstanding value after deductions of any financial charges held against the premises and/or any reasonable fees incurred in connection with the disposal and does not exceed the financial condition of £30,000.
- Where the property is the subject of a divorce or legal separation, upon completion of divorce/legal separation proceedings, it will be necessary to show the legal documentation in relation to the settlement.
- The acceptance of an owner/occupier (existing or recent) is be subject to special conditions laid down by the housing provider.

Question 17 – Family Members Living Separately

 Proof of members of immediate family living separately due to lack of suitable accommodation, etc, can include separate rent books, and proof of address details as for question 3.

Question 18 – Medical Conditions/Special Needs

- You must provide us with a 'Priority for Housing Need' form from a health/welfare professional (e.g., Social Worker, Health Visitor, etc) to support any claim that your health or any member of your family's health or welfare is affected by your current accommodation, or if a particular type or location of accommodation is required on health grounds.
- You may be required to fill in a more detailed form in relation to your disability/problem in order that the housing providers can fully assess your housing needs.

Questions 19 And 20 – Notice to Quit/Possession Orders

• You should provide, if applicable, a copy of any Court Order for possession (excluding rent arrears), to leave your present accommodation. (This is <u>not</u> just a simple letter from your landlord requesting that you leave the property).

General Information

- You should read the declaration carefully at the end of the form before signing.
- Any information given in the application form may require substantiation and may require the submission of further supporting evidence.
- It is the responsibility of the applicant to notify the housing providers of any change in circumstances which may affect their application.
- Your housing application will be reviewed on an annual basis and you will be required to submit current payslips and to notify the housing providers of any change in circumstances. It is the applicant's responsibility to keep the housing providers up to date with any changes which may affect your application, particularly with regards to change of address.
- If the housing provider is unable to contact you at the address given, you may miss an opportunity for housing and your name will be removed from the housing waiting list.
- The application form must be signed by the applicant, or in the case of a joint application, by both parties.
- Your completed housing application form may be returned to any Local Authority offices Commissioners offices), including the Housing Office, Department of Infrastructure.

Address details:

Department of Infrastructure	Port Erin Commissioners	Castletown Town Commissioners	Port St. Mary Village Commissioners
Housing Office	Commissioners Office	Town Hall & Civic Centre	Town Hall
Markwell House	Bridson Street	Farrants Way	Promenade
Market Street, Douglas	Port Erin	Castletown	Port St. Mary
IM1 2RZ	IM9 6AN	IM9 1NR	IM9 5DA
Tel: 685955	Tel: 832298	Tel: 825005	Tel: 832101
e-mail:	e-mail:	e-mail:	e-mail:
housing@gov.im	housing@porterin.gov.im	housing@castletown.gov.im	housing@portstmary.gov.im

 Any questions in relation to the completion of the form may also be addressed to any of the housing offices above either by post, by telephone (telephone: (01624) 685955), or by prior appointment.

Please read the following notes carefully before completing the application form.

Please note that its offence under paragraph 3A of the Housing (miscellaneous provisions) act 1976 to provide a false or misleading statement, which is subject to a £5000 fine and/or 6 months in prison or both.

Housing Application Part 2 – Application Form

Difficulty with forms or just want advice? The Housing Officer will help in private – just ask

- A. Please make an appointment with a Housing Officer from any of the contacts on page 6 or ask at the relevant town hall or the public counter at Markwell House in Douglas.
- B. If you have difficulty communicating with us in any way, please contact us (or ask a friend or helper to contact us) for alternative arrangements to be made. On request we can provide forms and information in other formats (large print, Audio and Braille). Please call Customer Services on (01624) 685955 or e-mail housing@gov.im

Confidential

Southern Region

Housing List Application Form

(The Housing Acts 1955 To 1976)

Please read these notes before completing the application form

- 1. Complete in **block capitals**
- 2. All guestions must be answered.
- 3. You or your spouse/partner/fiancé(e) must have resided in the Isle of Man for a period of at least ten years, three of which must have been spent in an area where Port Erin, Castletown, Port St. Mary and/or the Department of Infrastructure is the housing provider.
- 4. If you are married your application will be joint, and any tenancy offered will be joint (if both parties have a residency of 10 years which includes at least three years local residency). If you fail to declare a partnership in which you intend to live together then you will knowingly be committing a criminal offence.
- 5. Your gross income must not exceed £38,000 per annum, (£43,500 if you have one child, £47,000 if you have two children or £50,500 if you have three or more children) and must include income of your spouse, partner or fiancé(e).
- 6. You should include with this application form any information in support of your application, (such as a Court Order for Possession etc) or provide a written account of your circumstances at section 22.
- 7. Applications will not be considered from single people under the age of 18. Single applicants accepted onto the waiting list should be aware that it maybe some time before suitable accommodation becomes available.
- 8. If you are self employed you should note that you will not be permitted to carry out a trade, profession or business from a Public Sector Property without written approval of the housing provider.

Applicant Deta	ails				
Please complete in BLOCK CAPITALS	Appl	icant	Spouse/Partner/Fiancé(e)		
1. Full name	Surname		Surname	Surname	
	First Name(s)		First Name(s)	First Name(s)	
	Title: Mr / Mrs / Miss / Other (please specify)	Ms /	Title: Mr / Mrs / N Other (please spe		
Previous name (if applicable):	(First Name)	(Surname)	(First Name)	(Surname)	
Contact details				,	
Home Telephone No:					
Mobile No:					
Work No:					
Email Address:					
2. Status (Delete as appropriate)		dowed / Separated /		ed / Widowed / Separated /	
3. Current	Divorced / Eng	aged / Partners	Divorced	I / Engaged / Partners	
Address					
Date from: 4. Date of Birth					
5. Place of Birth					
6. No. years resident on island		Years		Years	
Previous					
addresses					
You should show all addresses and dates	(From	To)	(From)	
that you lived there.					
Please continue on a	(From	То)	(From)	
separate sheet if necessary					
,	(From	To)	(From	To)	
7. No. of years resident in the		,		,	
authority area	No of Years	<u></u>	No of Years		
8. Occupation					
	_				
National Insurance No:	/ /	/ /	/	/ / /	
9. Employer					

10. Weekly income at the time of application

(you will be required to produce three recent payslips to show your weekly or monthly income or other confirmation as requested. If you are self-employed you will need to show your previous two years audited accounts)

· · · · · · · · · · · · · · · · · · ·	Applicant	Spouse/Partner/ Fiancé(e)
Basic wage	£	£
Regular overtime	£	£
All Pensions (incl Supplement)(widows & Widows mother's allowance)	£	£
Benefits Child Benefit	£	
Income Support	£	
In receipt of Employed Person's Allowance (not taxable)	Y/N (please circle)	Y/N (please circle)
Other taxable benefits, (Carers Allowance, Adoption Allowance, Income support etc) If in doubt put it in)	£	£
Maintenance	£	£
Other income (please specify)	£	£

11. Savings

	Applicant Spouse/Partner/ Fiancé(ner/ Fiancé(e)
Do you have any savings? (Delete as necessary)	Yes	No	Yes	No
Do you have any assets / savings in excess of £30,000? (Delete as necessary)	Yes	No	Yes	No

This should include the net result of the sale of a previous property whether solely or jointly owned. If 'yes' please forward bank statements and/or disbursements of sale of property.

Other Persons requiring accommodation

12.Number of children in the family (pre-school and in full time education). Confirmation of children aged between 18-21 in full time education is required.

Surname	First name	Age	Date of Birth	Male/Female	Joint Custody Y/N. State %
1.					
2.					
3.					
4.					
5.					

13. Names of any	other pe	erson requiring n	ousing wi	th y	ou		
		Full name			-ull name		
Please specify the relation the applicant i.e. son / da							
employment / relative / lodger etc.			F	Relationship			
(Continue on a separate s							
necessary)							
Basic wage		£		1	<u>E</u>		
					<u> </u>		
Regular overtin	ne	£		1	<u>-</u>		
All Pensions		£		1	<u> </u>		
All Felisions		_		'	<u> </u>		
Taxable Benefit	ts	£		J	<u>E</u>		
		_			_		
Other income		£		1	£		
Accommodat	tion red	uired					
14. Area in which a		•	(please refe	r to r	nap on nac	ne 16)	
							Erin, Malew, etc.
SOUTHERN	in the SC	arry vvricie			ice 2		oice 3
REGION	iii tiic 50						
	Please tick b	ox if YES					
Please note – the	Parishes in	the Southern Region	n are: Arbory	, Cas	stletown, N	1alew, Po	rt Erin, Port
St.Mary, Rushen and	d Santon. F	Points will be deducte	ed for unjust	ified	refusal of	accommo	dation within
an area selected as	first, secon	nd or third choice.					
If you are prepared	to conside	r housing outside of	the SOLITHE	RN F	REGION VO	ıı may se	lect additional
1 1		South by completing			•	•	
		white areas of map on page	<i>.</i>				
		ville dieds of map on page					y OF ALL ISLAND.
Parish 1			Par	ish 2			
I will live anywhere	on the Isla	nd <i>Please tick box if YE</i>	S				
Type of accommodat							
	Number of Bedrooms required					galow	Flat
Please state if you have any special needs			House	T		galow Three	More than 3
Please state if you ha							
	ave any spe	ecial needs	One	T			More than 3
Details of pre	esent a	ecial needs	One	T			More than 3
Details of pre	esent a	cial needs commodation?	One ion	T			More than 3
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Details of predictions of prediction	esent a rented acc to Question ir name? your prese parents, living piece of pa ete the follo	ecial needs commodation? n 16 nt circumstances ng with friends per if necessary. Dwing (delete where app	One Y plicable): Flat Furnishe	Yes es es	Bunga	alow nished	No No No House Part
Details of predictions of prediction	rented according to Question rame? your presents, living piece of parents, living piece of pare	ecial needs commodation? n 16 nt circumstances ng with friends per if necessary. owing (delete where app	One Yellorable): Flat Furnishe Ground Floor	Yes es es	Bunga Unfur	alow nished 2 nd Floor	No No No House Part r 3 rd /4 th Floor
If no, give details of (such as living with petc) Use a separate If yes, please complete The property is a The property is If a flat, the property How many bedrooms	esent a rented acc to Question ir name? your prese parents, livin piece of parete the follow is on the sare there?	ecial needs commodation? n 16 nt circumstances ng with friends per if necessary. owing (delete where app	One Y plicable): Flat Furnishe Ground Floor 1	es es ed 1	Bunga	alow nished	No No No House Part 3rd/4th Floor Over 3
Details of preserved. 15. Do you live in a lif no, please go lis the tenancy in you like in a living with petc. Use a separate lif yes, please complete. The property is a living with petc. The property is a life property is life a flat, the property How many bedrooms. Do you have central life.	esent a rented acc to Question Ir name? your prese parents, livin piece of pa ete the follow is on the sare there? heating?	ecial needs commodation? n 16 nt circumstances ng with friends per if necessary. owing (delete where app	One Yellow Policable): Flat Furnishe Ground Floor 1	es es es	Bunga Unfur	alow nished 2 nd Floor	No No No No House Part 3rd/4th Floor Over 3 No
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Decree have a hallah farma		V	NI-		
Do you have a toilet for your own use?		Yes	No No		
Do you have a shared toil		Yes	No		
What is your weekly rent i		£			
Are there any defects in your	-	Yes	No No		
If yes, have you requested	the owner to rectify?	the owner to rectify? Yes			
What are these defects?					
Please provide details of who owns the property and what action has been taken to rectify the defects, using a separate sheet if necessary Details of prope	Landlord name and contact details: Action taken to rectify defects:				
э соло стрторо	,	арр поизіо)			
16. Do you or your spo own or previously own where applicable)	ed a property? (delete	Yes	N	lo	
If no , please go to Q	uestion 1/				
If yes , is it owned		Solely	Joi	Jointly	
Address of property:		Amount of mortgage/ loans outstanding on the property	£		
	Value of property £				
Have you or your spous previously owned a pro		Yes	No		
	s, date of sale, net sum a	of the sale showing the addrector repayment of mortgage, of the application	·		
17. Are there any member because of lack of suit	•	ly separated from you	Yes	No	
If yes please give detail	s:		1		
18. Do you or any member of your family suffer from a medical condition or special needs which are affected by your present accommodation or which necessitates a particular type or location of accommodation? Yes N				No	
If yes , please ask your He	ealth Professional or Social	Worker to complete the form	n 'Priority for	Housing	

Need' with you. The Special Housing Needs Self-Assessment form is also available – please ask for more details.

19. Are you under written Notice to Quit? (state reason for the Notice)	Yes	No
20. Has an application been made to the courts for a Possession Order against you? If yes you must supply a copy of the Possession Order with this application.	Yes	No
21. Have you or your spouse/partner applied to any other housing authority for accommodation?	Yes	No

If **yes**, what was the outcome of that application?

Additional Information

22. Please provide any additional information which you think may support your application.

(Continue on a separate sheet if necessary)

Please read the following carefully before signing the declaration.

This form fully completed should be taken to or posted to the addresses shown below. If you are unable to complete the form or provide any necessary enclosure you should seek advice from your housing provider as indicated on page 6. Receipt of this form does not imply acceptance onto the housing waiting list. You will be notified of the decision in writing.

If your application is refused you should write to via the housing provider to the southern group requesting a review of the decision, which will be determined by the Director of Housing, Department of Infrastructure, Markwell House, Market Street, Douglas, IM1 2RZ. If the decision is upheld upon review, you may then seek an appeal against that decision by lodging such appeal with your grounds for appeal in writing to the Director of Housing within 30 days of the review decision. Your appeal will be heard by an independent Member of the Legislature appointed by the Council of Ministers.

Allocation of properties is undertaken using a points system common to all housing authorities on the island. You will be awarded points based upon your length of residency, time on the waiting list, marital status, and number of children, income and adequacy of your current accommodation. Unjustified refusal of a tenancy and previous accumulative rent arrears may result in deduction of points awarded. You must let us know of any changes of address and significant change in your circumstances immediately as this may affect your point allocation

The housing providers who are working together to deliver the Southern Region shared list will use the information it obtains from customers for administration in connection with its statutory functions and the provision of any other relevant services to their customers, including marketing, auditing, risk assessment fraud and crime prevention. The information will be shared with all the housing providers responsible for the shared waiting list. The housing providers may share the information concerning the customer with Government departments and agencies only where there is a statutory requirement to do so, and with agents operating under confidentiality agreements. In addition, The housing providers may

have to disclose information about the customer to auditors, legal advisers' and regulatory bodies. Subject to the above and unless it has the right or duty to disclose or is permitted or compelled to do so by law the housing providers shall not disclose any information about the customer or the company without prior consent of the client or an authorised person, unless notified by the customer that such information is not required.

The client has a right to see a copy of the records relating to them and to have any errors corrected. To see a copy of their records the client should apply in writing to the Data Protection Officer.

Declaration

To the best of my knowledge and belief the information provided in this application is correct and complete. I understand that if any information provided is found to be deliberately or carelessly misleading or false it will prejudice the granting and retention of any tenancy. All the information provided to us must be correct. Misleading or falsified information could result in prosecution and jeopardise any future tenancy. I would draw your attention to the following section of the current Housing (Miscellaneous Provisions) Act 1976 which states:

- 3A. (1) A person commits an offence if, for the purpose of obtaining the provision of housing under this Schedule, whether for that person or another, that person
 - (a) makes a statement or representation knowing it to false; or
 - (b) produces or furnishes, or knowingly allows to be produced or furnished, any document or information knowing it to be false in a material particular.
 - (2) A person guilty of an offence under subsection (1) shall be liable on summary conviction to a fine not exceeding £5000 or to custody for a term not exceeding 6 months, or both.
 - (3) If a person is convicted of an offence under sub-paragraph (1) in connection with housing for himself or herself, the court may, in addition to any other penalty, make an order depriving that person of the estate or interest obtained as a result of the statement or representation or the production or furnishing of the document or information.

I/We have no objection to the housing providers, to whom this application is made, asking the people or places mentioned on this form for any information which is required to process this application and I consent that the information may be given to the Housing Providers.

The information you provide when you complete this application will only be processed for the purpose of dealing with your housing requirements. It may be shared with external partners for the purposes of assessing your eligibility and processing your application. Our Privacy Notice explains how we collect, store and handle your personal data in line with current data protection legislation as applied in the Isle of Man. If you would like to find out more please visit our website at

https://www.gov.im/about-the-government/departments/infrastructure/data-protection/ or contact our Data Protection Officer on 686785 for a paper copy.

Signature of Applicant:	
Signature of Joint Applicant:	
I/We authorise the Treasury to Providers.	disclose particulars of any benefits I/We may receive to the Housing
Signature of Applicant:	
Signature of Joint Applicant:	
Date of Application:	
	entification for each person requiring housing. re: Passport, Current Driving Licence, Current Employment I.D.

Housing Application Part 3 - Income Tax Authorisation

Department of Infrastructure Housing Office	Port Erin Commissioners Commissioners Office	Castletown Town Commissioners Town Hall & Civic Centre	Port St. Mary Village Commissioners Town Hall
	come Tax Division: Please ret	urn to (housing provider plea	-
with the relevant deta	ails overleaf in respect of the	applicants Income Tax status	grateful if you would provide me
	Signature		
Date	Signature		
I hereby authorise	e you to approach the In	come Tax Division for ve	rification of my/our income.
Tax reference no	S :		
Address			
Date of Birth			
•			
Full name of Spou	ıse/Partner		
Date of birth			
Full name of Appl	icant		
	by the applicant(s)		
Housing Waitin	g List — Income Tax a	uthorisation	
Income Tax Divisi 2 nd Floor Government Offic Bucks Road DOUGLAS IM1 3TX			
Application no: n	WL		

Farrants Way

Castletown

Tel: 825005

housing@castletown.gov.im

IM9 1NR

Promenade

Port St.Mary

Tel: 832101

housing@portstmary.gov.im

IM9 5DA

email:

Markwell House

housing@gov.im

IM1 2RZ

e-mail:

Tel: 685955

Market Street, Douglas

Bridson Street

Port Erin

IM9 6AN

e-mail:

Tel: 832298

housing@porterin.gov.im

TAX REF NO	NAME (s)
Total Gross Income in year end (including where relevant the gross)	ed 5 th April 20 Income of his/her spouse/partner in the above year)
£	£
Applicant	Spouse
3. Date first registered residentia	lly for Tax purposes
Applicant	Spouse
4. ANY OTHER RELEVANT INFORM	ATION
Income Tax Division Date	Signature:

<u>IMPORTANT INFORMATION – PLEASE READ</u>

Re: Housing Waiting List & Housing Allocations.

The provision of a shared public sector housing waiting list in the North, South and East of the Island is in operation and if you wish to be considered for allocation of a house in any of the areas shown on the maps in the application form then please sign the declaration below.

Due to restrictions arising from the Data Protection Act 2002 there are limitation on the information which can be shared between the Local Authorities. Likewise with the Department of Infrastructure Housing Division.

However, by signing this form it will mean that we can share information you have provided on the form between the Local Authorities who have housing stock in these areas and can be considered for all the Shared Waiting Lists. Our Privacy Notice explains how we collect, store and handle your personal data in line with current data protection legislation as applied in the Isle of Man.

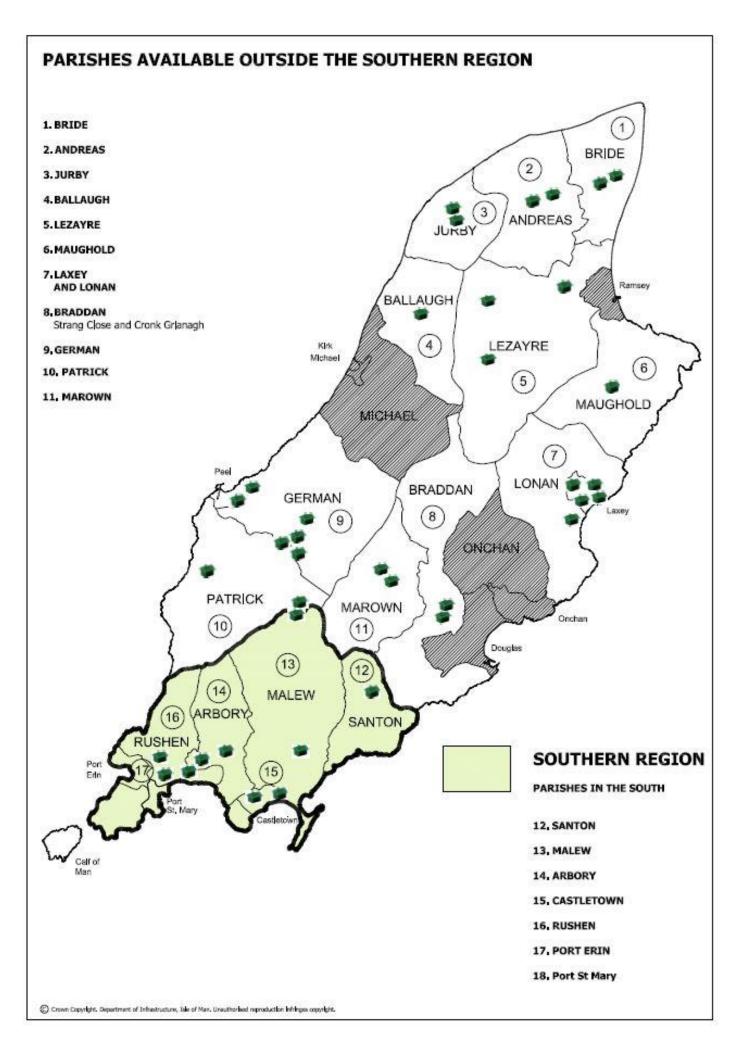
Shared Northern Housing Stock includes: Ramsey, Bride, Andreas, Jurby, Ballaugh, Lezayre and Maughold.

Shared Southern Housing Stock includes: Port Erin, Castletown, Port St Mary, Arbory, Malew, Santon and Rushen.

Shared Eastern Housing Stock includes: Braddan, Lonan/ Laxey.

Please note that you can still be considered for housing in Patrick and German which are in the ownership of the Department.

*MY / O shared v	OUR application data currently he	*DO / DO NOT grant permission that ld with Department of Infrastructure's Housing Division may also be essing my application for Public Sector Housing.
Signed	Applicant 1	



Housing Application Part 4 – Checklist

Please check that you have completed all the necessary documentation to support your application by ticking in the boxes below.

Wherever possible these items will be

Please supply original or certified copies of all documents.

Full address history, including dates of residence.

15.

photocopied and returned to you while you wait. Have you included Office Use only 1. Evidence of divorce or legal separation (Question 2) 2. Current utilities bill or bank statement, or similar showing your present address (Question 3) Birth Certificates for each person to be housed, including children 3. (Questions 4, 5, 12 & 13) Proof of income (min 3 recent payslips inc. benefits) (Questions 10 & 13) 4. Proof of savings and investments (Questions 11 & 13) 5. Rent book or name & address of landlord (Question 15) 6. 7. Details of ownership/co-ownership of any property (Question 16) Details of previously owned properties (Question 16) 8. 9. Evidence of immediate family living separately (Question 17) 10. Supporting form from a health professional (Question 18) 11. Possession Order (Questions 19 & 20) 12. Completed Income Tax authorisation form along with relevant signatures. If joint application both signatures are required. (pages 14& 15) Other evidence/supporting information (please list below) 13. 14. Photographic I.D. for each applicant

Checked By Date:

Acknowledgement Letter sent: Date:

Special Housing Needs Self-Assessment Form or Support for Rehousing form sent please state:

...... Date:

For Office Use Only (Southern Region)

	Yes	No	Points Allocated
Resident IOM			
(10 years)			
Area resident			
(3 years) Landlord			
reference			
Family size (no.			
of Children)			
No. under 16			
No. aged 16 to			
21			
Court			
Possession			
Order Private Sector			
Tenant			
Manx Housing			
Trust			
Environment			
Health Points			
Health/Welfare			
Points			
Arrears			
Photo I.D.			
Financial/			
property assets			
Income:			
	Calculations		
Gross Income			
(single)			
including Treasury			
Benefits			
(excluding Child			
Benefit)			
Gross Income			
(couple)			
including			
Treasury Benefits			
(excluding Child			
Benefits)			
Income Tax			
check			
Total Points			
	<u>I</u>		

Recommendation:		4	Approve / Refuse	
Reason if Refus	al:			
· · · · · · · · · · · · · · · · · · ·			Deter	
igned:			Date:	
Points Deduction/Unjustified Refusal:		l:	Yes / No	
Additional Infor	mation. (Office use only	<i>(</i>)		
	_			
ease take or post t	this form to any of the fo	llowing addresses:		
ease take or post t	his form to any of the fo	llowing addresses:		
epartment of Ifrastructure Dusing Office	Port Erin Commissioners Commissioners Office	Castletown Town Commissioners Town Hall & Civic Centre	Port St. Mary Village Commissioners Town Hall	
epartment of nfrastructure ousing Office arkwell House arket Street, Douglas	Port Erin Commissioners Commissioners Office Bridson Street Port Erin	Castletown Town Commissioners Town Hall & Civic Centre Farrants Way Castletown	Village Commissioners Town Hall Promenade Port St.Mary	
repartment of infrastructure ousing Office larkwell House larket Street, Douglas M1 2RZ el: 685955	Port Erin Commissioners Commissioners Office Bridson Street	Castletown Town Commissioners Town Hall & Civic Centre Farrants Way	Village Commissioners Town Hall Promenade	



The Information in this booklet can be provided in large print or audio tape on request