



Department of Infrastructure

Housing Waiting List

Application Form and Guidance Notes

July 2023 Rev 1

Housing Application Part 1 - Guidance Notes

The Department of Infrastructure offers the following as guidance only in 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 our Public Sector Housing waiting list. Contact Customer Services 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 an area where the Department is the housing authority.
- 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 | |

• Applications from single/couples under the age of 18 will not be considered.

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 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. Please enclose all supporting documents refer to the check list on page 16.

• **Failure** to complete any part of the application form **will** result in the form being returned to the applicant without consideration.

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 application 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 Department's Housing Area.

• The total time residing in the Department's areas 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 of the Department.

Question 10 - 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 Department 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, capital assets and any investments which you or your partner may have.
- This should include the proceeds of sale of a current or 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 enclosed 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 on the maps on page 15.

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 of the Department, 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 Department 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 subject to special conditions laid down by the Department.

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 Department 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).

Question 21 – Other Housing Authorities

• Applicants may not be on more than one public sector waiting list at the same time. Where applicants are residentially qualified in more than one housing authority area, they must decide to which authority they prefer to apply.

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 Department 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 Department of any change in circumstances. It is the applicant's responsibility to keep the Department up to date with any changes which may affect your application, particularly with regards to change of address.
- If the Department 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 should be returned to:

Housing Officer
Department of Infrastructure
Markwell House
Market Street
Douglas
IM1 2RZ

e-mail: housing@gov.im

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

Please read these 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, ask at our Public Counter at Markwell House or telephone Customer Services on (01624) 685955.
- 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



Department of Infrastructure

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 questions 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 the Department is the housing authority.
- 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).
- 5. If you have a partner or fiancé(e) your application will be joint (if both parties are residentially qualified). If you fail to declare a partnership in which you intend to live together then you will knowingly be committing a criminal offence.
- 6. 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).
- 7. 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.
- 8. No applications will be considered from single people under the age of 18. Single applicants accepted onto the waiting list should be aware that suitable accommodation may be in short supply.
- 9. 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 of the Housing Authority.

| Applicant Deta | ails | | | | |
|---------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------|--------------------------|---------------------------------------------------|--|
| Please complete in BLOCK CAPITALS | Appl | licant | Spouse/Partner/Fiancé(e) | | |
| 1. Full name | Surname | | Surname | | |
| | First Name(s) | | First Name(s) | | |
| Previous name (if applicable): | Title: Mr / Mrs / Miss / Other (please specify) | Title: Mr / Mrs / Miss / Ms / Other (please specify) | | iss / Ms / cify) | |
| | (First Name) | (Surname) | (First Name) | (Surname) | |
| Contact details: Home Telephone No: | | 1 | | I | |
| Mobile No: | | | | | |
| Work No: | | | | | |
| Email Address: | | | | | |
| 2. Status (Delete as appropriate) | | idowed / Separated / laged / Partners | | d / Widowed / Separated / / Engaged / Partners | |
| 3. Current Address | | | | | |
| Date from: | | | | | |
| 4. Date of Birth | | | | | |
| 5. Place of Birth | | | | | |
| No. years resident on island | | Years | | Years | |
| Previous addresses | | | | | |
| You should show all addresses and dates that you lived there. | (From | To) | (From | To) | |
| Please continue on a separate sheet if necessary | (From | To) | (From | To) | |
| 7 No of years | (From | To) | (From | То) | |
| 7. No. of years resident in the authority area | No of Years | | No of Years | | |
| 8. Occupation | | | | | |

| National Insuranc | e No: | | / | / | | / / | | 1 | | / | / | 1 |
|----------------------------------------------------------------|-----------|---------------------|-------|-----------|--------|-----------------------------|------|-------------|-------|-------|-----------|---------------|
| 9. Employer (if applicable) | | | | | | | | | | | | |
| | ired to p | produce t | three | recent pa | ayslip | s to show your w | | | | | | rmation as |
| requested. If yo | u are se | elf-emplo | yed y | | | o show your previ licant | ous | | | | | ancé(e) |
| Basic wage | | | £ | | ·PP | 1100110 | | £ | .C/ 1 | | <u>.,</u> | <u> </u> |
| Regular overti | ime | | £ | | | | | £ | | | | |
| All Pensions(in Supplement)(Widows mother allowance) | widows | ; & | £ | | | | | £ | | | | |
| Taxable Benef Adoption, Incor etc) | - | - | £ | | | | | £ | | | | |
| Income suppo (depending on circumstances) | rt | | £ | | | | | £ | | | | |
| Child Benefit | | | £ | | | | | £ | | | | |
| In receipt of Employed Person's Allowance (not taxable) | | Y/N (please circle) | | | | Y/N (please circle) | | | | | | |
| Other taxable | incor | ne | £ | | | | | | | | | |
| Maintenance | | | £ | | | | | | | | | |
| Other income specify) | (please | 2 | £ | | | | | £ | | | | |
| 11. Savings | | | | | | | | | | _ | | |
| | | | | | | App | lica | nt | Spo | ouse/ | Partne | er/ Fiancé(e) |
| Do you have (Delete as necess of the guidance r | sary) pl | | | uestion : | 11 | Yes | | No | | Yes | | No |
| Do you have excess of £3 | _ | | - | _ | | Yes | | No | | Yes | | No |
| This should include If 'yes' please for | | | | | | | | | | | jointly | owned. |
| Other Perso | | | | | | | | | | | | |
| 12. Number of cl Confirmation of c | | | | | | | | • | uiro | d | | |
| Surname | | name | Det | Age | | ate of Birth | | lale/Female | | Join | | ody Y/N. |
| | 5€ | | | | + | | | , : ciliale | - | Stat | e % | |
| 1. | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | |

| 5. | | | | | | |
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| 13. Names of any other p | erson requi | rina housin | a with | VOLI | | |
| Please specify the relationship with the applicant i.e. son / daughter /in | Full name | <u>g</u> | 9 111111 | Full name | | |
| employment / relative / lodger etc. (Continue on a separate sheet if necessary) | Relationship | | | Relationsh | ip | |
| Basic wage | £ | | £ | | | |
| Regular overtime | £ | | | £ | | |
| All Pensions | £ | | | £ | | |
| Taxable Benefits | £ | | | £ | | |
| Other income | £ | | | £ | | |
| Accommodation re | quired | | | | | |
| 14. Area in which accommo | odation is req | uired (please | e refer to | map on pa | age 15) | |
| First Choice | | . If you | ı have n | o preferenc | e please ti | ck here () |
| Second Choice | | | | | | |
| | | | | | | |
| Third Choice | | | | | | |
| Third Choice | | | | | | |
| Third Choice Please note - areas 1-6 are co | onsidered as N | orth, 7 & 8 ar | | | | |
| Third Choice | onsidered as N | orth, 7 & 8 ar | | | | |
| Please note - areas 1-6 are constant. Poin | onsidered as N its will be dedu | orth, 7 & 8 arcted for unjus | stified ref | usal of suit | table accor | nmodation area. |
| Third Choice Please note - areas 1-6 are contained 14,13,15 & 16 are South. Point Type of accommodation requires | onsidered as N its will be dedu | orth, 7 & 8 arcted for unjus | tified ref | usal of suit | table accor | mmodation area. |
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| Are there any defects in your present accommodation? | Yes | No | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------|------|
| If yes, have you requested the owner to rectify? | Yes | No | |
| What are these defects? | | | |
| | | | |
| | | | |
| | | | |
| Please provide details of who owns the property | Landlord name and contact details: | | |
| and what action has been taken to rectify the | | | |
| defects, using a separate sheet if necessary | | | |
| | | | |
| | Action taken to rectify defects: | | |
| | Action taken to rectify defects. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Details of property ownership (if | | | |
| Details of property ownership (| аррисаріе) | | |
| 16 De vers en recommendado la propiedado la compansión de | | | |
| 16. Do you or your spouse/partner/fiancé(e) | | | |
| Own or previously owned a property? (delete where applicable) | e Yes | N | 0 |
| where арріпсавіс) | Tes | IN | U |
| If no , please go to Question 17 | | | |
| ii iio, picase go to Question 17 | | | |
| If yes , is it owned | Solely | Joir | ntly |
| ii yes, is it owned | Solely | 3011 | iciy |
| Address of property: | Amount of mortgage/ | | |
| , , | loans outstanding on the | £ | |
| | property | | |
| | ' ' ' | | |
| | Value of property | £ | |
| | | | |
| Is the property is in good condition? | Yes | No |) |
| Have you or your spouse/partner/fiancé(e) | Yes | N | 0 |
| previously owned a property? | 163 | | |
| | | | _ |
| If yes please provide, under separate cover, details | | • | |
| name of vendor or vendors, date of sale, net sum af | ter repayment of mortgage, of | charges or loa | ans. |
| | | | |
| Special circumstances relating t | to application | | |
| | | | |
| 17. Are there any members of your immediate fami | ly separated from you | | |
| because of lack of suitable accommodation? | | Yes | No |
| | | | |
| If yes please give details: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 18. Do you or any member of your family suffer fro | m a medical condition or | | |
| special needs which are affected by your present | | Yes | No |
| necessitates a particular type or location of acco | | 103 | 140 |
| necessitates a particular type of location of acco | ouddorr. | <u>ı</u> | |

If **yes**, please ask your Health or Social Worker to complete the form 'Support for Rehousing' 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 the 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 | Dloaco | provide any | additional | information | which \ | ou think ma | v support vour | application |
|-----|----------|-------------|------------|---------------|---------|---------------|----------------|--------------|
| ZZ. | . Piease | Drovide anv | auullionai | IIIIOIIIIauon | WHICH V | /OU LIHIK IHA | v Subbort vour | abblication. |

(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 address shown below. If you are unable to complete the form or provide any necessary enclosure you should seek the advice of the housing office. 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 the housing committee seeking a review of the decision to refuse. If that decision is upheld by the housing committee you may then seek an appeal against that decision by writing to the Director of Housing, Department of Infrastructure, Markwell House, Market Street, Douglas IM1 2RZ. Your appeal will be heard by the Director of Housing, or in the case of an application for housing owned by the Department, by a 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 Department of Infrastructure will use the information it obtains from customers for administration in connection with its statutory functions and the provision of any other services to its customers, including marketing, auditing, risk assessment fraud and crime prevention. In administering the Department or any services provided to the customer, The Department of Infrastructure may share the information concerning the customer with Government departments only where there is a statutory requirement to do so, and with agents operating under confidentiality agreements. In addition, The Department of Infrastructure 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 Department of Infrastructure 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 Department of Infrastructure may from time to time advise the client of products and services offered by The Department of Infrastructure that it believes would be of interest.

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

Housing Application Part 3 – Income Tax Authorisation

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 have no objection to the Housing Division, to whom this application is made, may ask any of the people or places mentioned on this form for any information which is required to process this application and that the information may be given to the Department.

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 disclose particulars of any benefits I/We receive to the Housing Providers. |
| Signature of Applicant: |
| Signature of Joint Applicant: |
| Date of Application: |

Please provide photographic identification for each person requiring housing:

Acceptable forms of identification are:

Passport, Current Driving Licence, Current Employment I.D.

| Application no: HWL | |
|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Income Tax Division 2 nd Floor Government Office Bucks Road DOUGLAS IM1 3TX | |
| Housing Waiting List – Incor | ne Tax authorisation |
| To be completed by the applica | nt(s) |
| Full name of Applicant | |
| Date of birth | |
| Full name of Spouse/Partner | |
| Date of Birth | |
| Address | |
| | |
| Tax reference no | |
| | |
| I hereby authorise you to approach | the Income Tax Division for verification of my/our income. |
| Date Signa | ture |
| Signa | ture |
| TO BE COMPLETED BY THE DEPAR | TMENT OF INFRASTRUCTURE |
| | for Public Sector Housing and I should be grateful if you would provide me pect of the applicants Income Tax status. |
| Date Signat | ure |

| Customer Services Team, Hou | using Office, DOI |
|--------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| TAX REF NO | NAME (s) |
| Total Gross Income in ye (including where relevant the | ar ended 5 th April 20 gross income of his/her spouse/ partner in the above year) |
| £ | £ |
| Applicant | Spouse |
| 3. Date first registered resi | dentially for Tax purposes |
| | |
| Applicant | Spouse |
| 4. ANY OTHER RELEVANT IN | IFORMATION |
| | |
| | |
| Date Si | gnature: |

Income Tax Division

IMPORTANT INFORMATION – PLEASE READ

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.

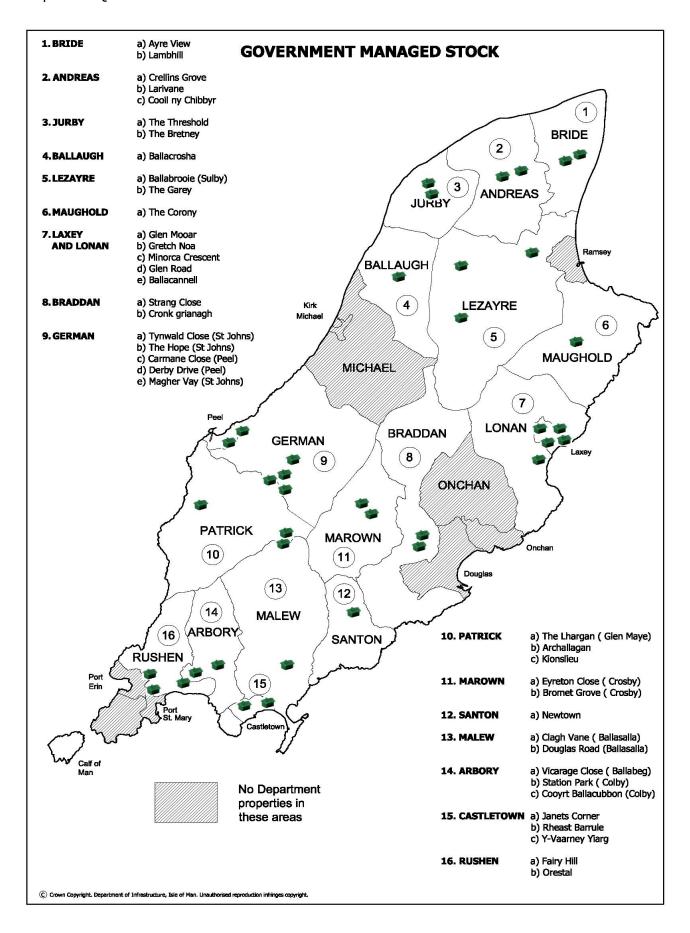
Shared Southern Housing Stock includes: Port Erin, Castletown, Port St Mary, Arbory, Malew, Santon and Rushen.

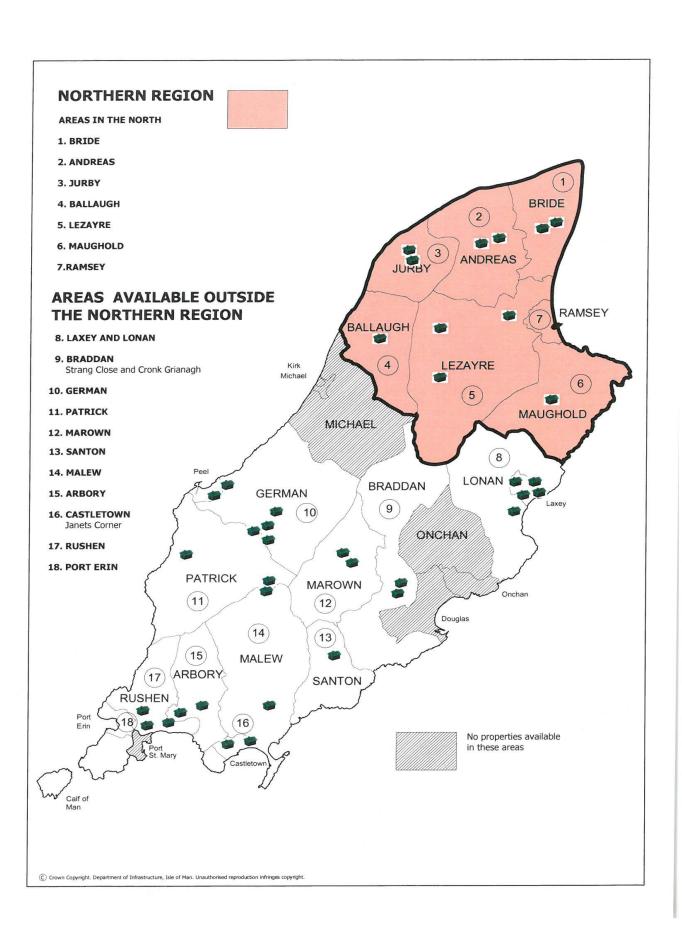
Shared Eastern Housing Stock includes: Braddan, Lonan/ Laxey.

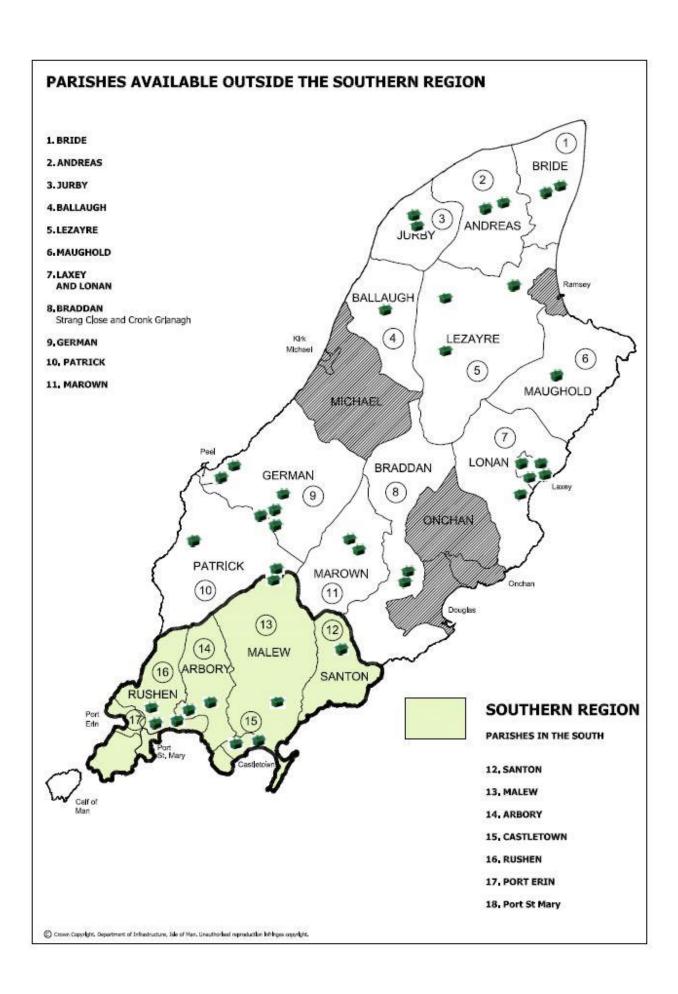
Please note that you can still be considered for housing in Patrick and German which are in the ownership of the Department.

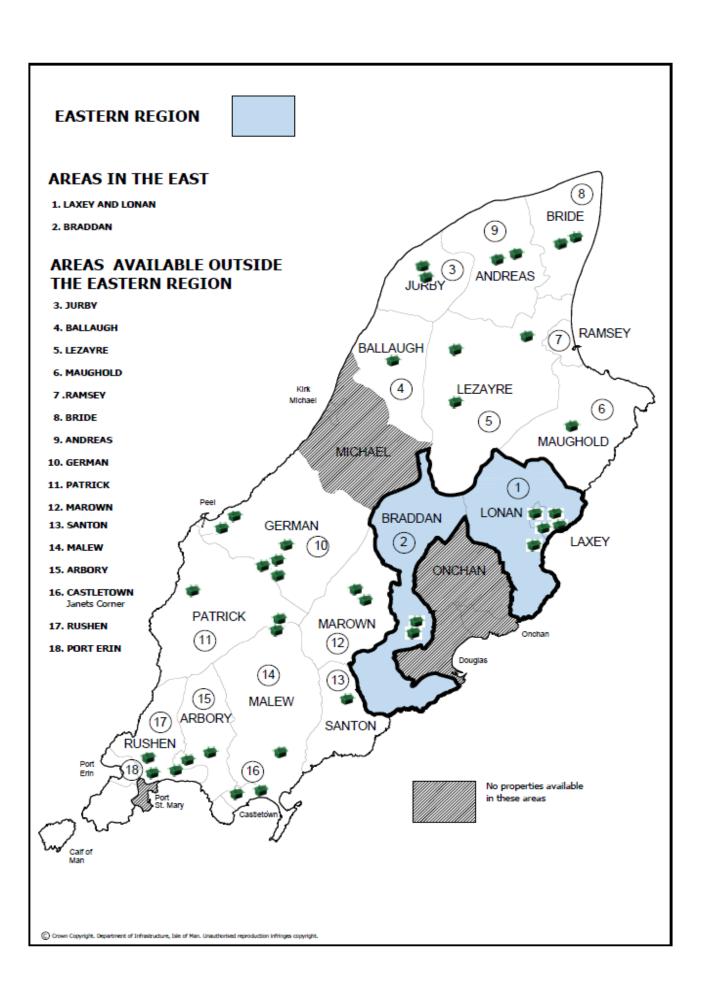
| that *MY / OUR application | *DO / DO NOT grant permission on data currently held with Department of Infrastructure's Housing Division may be sole purpose of processing my application for Public Sector Housing. |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Signod | Date |
| Applicant 1 | Applicant 2 (if Joint Application) |

This map shows the areas of the Island where the Department has Public Sector Housing. Please think carefully about where you would be prepared to live and mark this clearly on the map. Please also complete at Question 14.









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.

Please supply original or certified copies of all documents. Wherever possible these items will be 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) | | |
| 3. | Birth Certificates for each person to be housed (Questions 4, 5, 1 | 12 & 13) 🗖 | |
| 4. | Proof of income (min 3 recent payslips inc. benefits) (Questions | 10 & 13) 🗖 | |
| 5. | Proof of savings and investments (Questions 11 & 13) | | |
| 6. | Rent book or name & address of landlord (Question 15) | | |
| 7. | Details of ownership/co-ownership of any property (Question 16) |) 🗆 | |
| 8. | Details of previously owned properties (Question 16) | | |
| 9. | Evidence of immediate family living separately (Question 17) | | |
| 10. | Supporting form from a health professional (Question 18) | | |
| 11. | Court Possession Order (Questions 19 & 20) | | |
| 12. | Completed Income Tax authorisation form (pages 13 & 14) | | |
| 13. | Other evidence/supporting information (please list below) | | |
| 14. | Photographic I.D. for each member of the household | | |
| | | | |
| Check | ked By Date: | | |
| Ackno | owledgement Letter sent: Date: | | |
| Speci | al Housing Needs Self-Assessment Form or Support for Rehousing | form sent please | state: |
| | . Date: | | |

For Office Use Only

| | 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 | | | |

| Recommendation: | Approve / Refuse | | | |
|-------------------------------------------|------------------|--|--|--|
| Reason if Refusal: | | | | |
| | | | | |
| | | | | |
| | | | | |
| Signed: | Date: | | | |
| Points Deduction/Unjustified Refusal: | Yes / No | | | |
| Additional Information. (Office use only) | | | | |
| | | | | |
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| | | | | |

Please take or post this form to:

The Housing Division
Department of Infrastructure
Markwell House
Market Street
Douglas
IM1 2RZ

e-mail: housing@gov.im



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

Housing Office

Markwell House, Market Street Douglas, Isle of Man