

HHA Application Form



Please list the areas or address of interest

1. Personal Details

Applicant 1.

Title (Mr, Mrs, Miss, Ms, Other)

First Name

Surname

Date of Birth

National Insurance Number

Daytime Phone Number

Mobile Phone Number

Email Address

Current Address

Do you currently have a mortgage

Date moved into current property

Date Application received at hha

Applicant 2.

Title (Mr, Mrs, Miss, Ms, Other)

First Name

Surname

Date of Birth

National Insurance Number

Daytime Phone Number

Mobile Phone Number

Email Address

Current Address

Do you currently have a mortgage

Date moved into current property

Applicant 1.

Landlords Name & Address

if successful in allocation of a property we will request from you a Reference Request Mandate Form to obtain a Landlord Reference

Applicant 2.

Landlords Name & Address

if successful in allocation of a property we will request from you a Reference Request Mandate Form to obtain a Landlord Reference

We require 5 years worth of addresses, you do not need to list your current address

Address and Postcode

From - To.

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Reason for leaving

Address and Postcode

From - To.

--

Reason for leaving

Address and Postcode

From - To.

--

Reason for leaving

Address and Postcode

From - To.

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Reason for leaving

2. Employment Details

Applicant 1.
Name of main employer
<input type="text"/>
Job Title
<input type="text"/>
Address of employer
<input type="text"/>
<input type="text"/>
<input type="text"/>
Annual income amount (net)
<input type="text"/>
monthly
<input type="text"/>
Time with current employer
<input type="text"/>
Do you have a permanent contract with this employment
<input type="text"/>
<small>We require the following information if you have more than 1 job. If you are selected for a property we will ask you to support the income information by contacting your employer or requesting your P60 and wage slips.</small>
Name of 2nd employer
<input type="text"/>
<input type="text"/>
Address of 2nd employer
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Annual income amount (net)
<input type="text"/>
Time with 2nd employer
<input type="text"/>
Applicant 1.

Applicant 2.
Name of main employer
<input type="text"/>
Job Title
<input type="text"/>
Address of employer
<input type="text"/>
<input type="text"/>
<input type="text"/>
Annual income amount (net)
<input type="text"/>
monthly
<input type="text"/>
Time with current employer
<input type="text"/>
Do you have a permanent contract with this employment
<input type="text"/>
<small>We require the following information if you have more than 1 job. If you are selected for a property we will ask you to support the income information by contacting your employer or requesting your P60 and wage slips.</small>
Name of 2nd employer
<input type="text"/>
<input type="text"/>
Address 2nd employer
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Annual income amount (net)
<input type="text"/>
Time with 2nd employer
<input type="text"/>
Applicant 2.

Details of any other income

Details of any other income

If Self Employed

Applicant 1.

Name of Trading Name/Company

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Registered Address

Length of Time Trading

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Do you have an Accountant

--

Do you complete your own tax return

--

Annual income amount

--

Applicant 2.

Name of Trading Name/Company

--

Registered Address

Length of Time Trading

--

Do you have an Accountant

--

Do you complete your own tax return

--

Annual income amount

--

3. Please provide details of any outgoings/debts

Applicant 1.

Current monthly rent

Details of any trust deeds or secured loans

Car payments
please give details of payments

Personal loans
please give details of payments

Credit card balances & payments
please give details of payments

Applicant 2.

Current monthly rent

Details of any trust deeds or secured loans

Car payments
please give details of payments

Personal loans
please give details of payments

Credit card balances & payments
please give details of payments

Details of any other outstanding debts or payments

Details of any other outstanding debts or payments

4. Household Details

In order for HHA to contact you regarding a property suitable to your needs please

complete the following information -

People who will be moving with you and living with you permanently (incl. children)

Full Name	
<input type="text"/>	
Relationship to you	
<input type="text"/>	
Date of Birth	Do they live with you now
<input type="text"/>	<input type="text"/>
If No, please tell us their address and postcode	
<input type="text"/>	

Full Name	
<input type="text"/>	
Relationship to you	
<input type="text"/>	
Date of Birth	Do they live with you now
<input type="text"/>	<input type="text"/>
If No, please tell us their address and postcode	
<input type="text"/>	

Full Name	
<input type="text"/>	
Relationship to you	
<input type="text"/>	
Date of Birth	Do they live with you now
<input type="text"/>	<input type="text"/>
If No, please tell us their address and postcode	
<input type="text"/>	

Are you or any person who will be moving with you expecting a baby	
Yes or No	<input type="text"/>

If yes, who is expecting a baby

When is the baby due

Do you have residential access to a child or children who do not live with you

Yes or No

If yes, please tell us the arrangements that are in place

Tell us the name/s and permanent address/es of your children

Details of any pets

Do you have any special needs/medical requirements which may affect the type of property allocated to you?

Extra Information

Use this box to tell us why you are applying for one of our properties.

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5. Anti Social Behaviour

Applicant 1.
<p>Have you or any member of your household ever been investigated or evicted for Antisocial Behaviour</p> <p>Yes/No</p> <input type="text"/>
<p>Are you or is any member of your household subject to an Antisocial Behaviour Order</p> <p>Yes/No</p> <input type="text"/>

Applicant 2.
<p>Have you or any member of your household ever been investigated or evicted for Antisocial Behaviour</p> <p>Yes/No</p> <input type="text"/>
<p>Are you or is any member of your household subject to an Antisocial Behaviour Order</p> <p>Yes/No</p> <input type="text"/>

<p>Are you currently involved in any criminal investigation or party to any ongoing criminal court process?</p> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Do you have/ever had any criminal conviction?</p> <input type="text"/> <input type="text"/> <input type="text"/>

6. Non UK Citizen

Applicant 1.
<p>Are you or your partner subject to immigration control</p>

Applicant 2.
<p>Are you or your partner subject to immigration control</p>

Yes/No

Are there any conditions or limits to your permission to stay in the UK

Yes/No

Have you completed a Habitual Residence Test

Yes/No

Yes/No

Are there any conditions or limits to your permission to stay in the UK

Yes/No

Have you completed a Habitual Residence Test

Yes/No

How did you hear about HHA

If you have registered on the Highland Housing Register please let us know the following information -

Highland Housing Register Ref.	<input type="text"/>
Date Registered	<input type="text"/>
Amount of Points	<input type="text"/>

Are you or anyone who will be living with you related to anyone working or employed by HHA.

If yes please tell us the details of the person you are connected to

Name	Position
<input type="text"/>	<input type="text"/>
Relationship	
<input type="text"/>	

7. Areas of Interest

To ensure we mail you relevant information please tick the areas of interest to you (if you do not tick an area we will not send you any information regarding any new developments for that area). We will not send you mail on properties that become available on existing developments. Properties that become available on existing developments will be advertised on social media and our website.





Area

tick box Main villages and towns in the area

- Caithness
- Sutherland
- Ross and Cromarty
- Skye and Lochalsh
- Inverness
- Inverness City Centre
- Nairn
- Lochaber
- Badenoch and Strathspey

<input type="checkbox"/>	for further information on area you require
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

This application is for properties managed by HHA who are a registered Landlord/Letting Agent with the Highland Council. Any information for references from your employer, accountant, bank or landlord will require the completion of a separate mandate from or written consent from the applicant.

HHA are members of Landlord Accreditation Scotland, Chartered Institute of Housing, Scottish Association Institute of Housing, Scottish Association of Landlords and the Council of Letting Agents.

HHA will not discuss the information you have given with any other housing provider apart from the Highland Council and the Landlord.

HHA adhere to guidelines published in the Data Protection Act of 1998 and the General Data Protection Regulation (EU) 2016/679 which is applicable from the 25 May 18, together with any domestic laws form subsequently enacted.

HHA will keep your application form on file for a maximum 5 year period after this date your application will be confidentially destroyed.

Please read this declaration carefully

I/We can confirm that the details I have provided on this application form are true and accurate.

I/We understand that if I/we give false or misleading information, or do not provide relevant information, now and at any time, my/our application may be suspended or cancelled.

If I/we get a tenancy based on false or misleading information, I understand and accept that the landlord may take me to court to evict me/us.

I/We understand and accept that if I/we receive a Mid-market tenancy from HHA HHA my/our name(s) will be taken off the Highland Housing Register.

I/We understand and accept that HHA may make such enquires as they deem necessary to verify the information given on this application form is true and accurate.

<u>Signatures</u>	
Applicant 1. Print Name	Your Signature
<input type="text"/>	<input type="text"/>
Date	<input type="text"/>
Applicant 2. Print Name	Your Signature
<input type="text"/>	<input type="text"/>
Date	<input type="text"/>

once complete please return to -
HHA, Fairways, Castle Heather, Inverness IV2 6AA

If you have supplied an email address, we will acknowledge receipt of your application form

HHA is the trading name of Highland Housing Alliance Register No. 279579

