

**Closing date for applications: 15<sup>th</sup> February 2021**

**Applicant's surname: .....**

**First line of applicant's address:**

.....

## APPLICATION FORM

### Dartmouth United Charities ('DUC')

First Floor, 3 The Quay, Dartmouth TQ6 9PS

T: 01803 835006

E: [info@dartmouthunitedcharities.org.uk](mailto:info@dartmouthunitedcharities.org.uk)

Registered Charity Number: 203399

<b>Property:</b>	<b>Britannia Ave, Dartmouth TQ6</b>
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**How did you find out about the vacancy?**

<b>Newspaper advert</b>	
<b>DUC website</b>	
<b>Other website (please state which)</b>	
<b>Poster (where seen)</b>	
<b>Other (please state)</b>	

# 1. PERSONAL DETAILS:

1.1 Give details of yourself, and anyone else to be considered in this application (including all children):

<u>Last name:</u>	<u>First name:</u>	<u>Gender:</u>	<u>Date of birth:</u>	<u>Place of birth:</u>	<u>Relationship to applicant:</u>	<u>Occupation</u>
					<i>Main applicant</i>	

Please Note: references below to 'you', 'yourself' or 'your' are to all adult applicants (if applicable)

1.2 Please give details of all addresses where you have lived in the last 3 years, listing your current address first:

<u>Address:</u>	<u>Type of accommodation: e.g. 2-bed house</u>	<u>Type of occupancy: e.g. tenant</u>	<u>Name &amp; address of owner or landlord &amp; relationship to you</u>	<u>From dd/mm/yy</u>	<u>To dd/mm/yy</u>
					To date

1.3 Contact Details:

Home tel:..... Mobile 1: ..... Mobile 2:.....

Email 1:..... Email 2:.....

1.4 Is any member of your household expecting a baby: Yes [ ] No [ ] Due date: .....

1.5 Do you have any pets? Yes [ ] No [ ] If yes, give details:.....

1.6 Is any applicant related to a Trustee/employee of the DUC? Yes [ ] No [ ] Details: .....

1.7 Does any household member smoke? Yes [ ] No [ ]

1.7 Are there any health, disability or social factors that you would wish the Trustees to take into consideration when assessing your application? (continue on a separate sheet if needed)

.....

## 2. EMPLOYMENT DETAILS:

2.1 Give details for all applicants in employment. Please continue on separate sheet if required.

Applicant's name: 1. ....		
Name & address of employer/place of work: .....		
.....		
Occupation: .....	Date employment started: .....	Full/Part time.....
Average hours/week worked.....	Hourly pay .....	Temp/perm.....

Applicant's name: 2. ....		
Name & address of employer/place of work: .....		
.....		
Occupation: .....	Date employment started: .....	Full/Part time.....
Average hours/week worked.....	Hourly pay .....	Temp/perm.....

## 3. FINANCIAL CIRCUMSTANCES:

### 3.1 Income & Expenditure

Please calculate your monthly surplus household income by completing the Surplus Income Calculation Table at the end of this form (the details included in this table form part of your application and will be confirmed by the declaration at section 8).

3.2 **Capital and savings** Please complete the table for savings or investments held by all applicants.

Bank Accounts	£
Post Office / Building Society Accounts	£
National Savings Certificate (state date bought)	£
Premium Bonds	£
Redundancy Payment (if in last twelve months)	£
Cash – this includes any cash held at home	£
Any other capital – give details	£
Stocks/ shares/ unit trust – please give current value or state name of companies, and number of stocks/ share held on a separate sheet of paper	£

3.3 If you currently own ANY property please give details below:

Address: .....

Estimated value: £.....

Outstanding Mortgage: £.....

3.4 Do you currently save on a regular basis? Yes [ ] No [ ]

What are you saving for?

.....

3.3 Debts Please complete the table for debts owed by all applicants

Overdraft	£
Credit cards	£
Hire purchase	£
Loans	£
Store cards	£
Family /friends	£
Other	£

#### 4. HOUSING REQUIREMENTS:

4.1 Are you registered with Devon Home Choice? Yes / No

If yes, date of registration: ..... Band: .....

(we encourage all applicants to register by going to <https://www.devonhomechoice.com> )

4.2 Please explain why you would like to move and your reasons for applying to the DUC for housing?

.....  
.....  
.....

4.3 If you were offered a place as a resident what would you future plans for housing be over the next 3-9 years?

.....  
.....  
.....  
.....

## 5 CONVICTIONS, REFERENCES & CREDIT CHECKS:

5.1 Do you or does anyone who will be moving in with you have any unspent criminal convictions? A conviction will not automatically exclude you from being considered as an applicant, but Trustees need to be fully aware of your circumstances.

Yes [ ] No [ ] If **YES**, please give details:

Name of individual convicted? .....

Date of Conviction? .....

Nature of Conviction?.....

Any other details?.....

5.2 If this application is successful, references will be sought from your employer (if applicable) and your current or past landlord in addition to a professional who is prepared to provide a character reference.

Please give the name and full address of a professional (eg health visitor, GP, childrens centre worker) who will provide a character reference for you (this person should not be related to you, nor an employee or member of the DUC Board of Trustees).

.....  
.....

Please confirm that you give consent for credit checks being obtained if your application is shortlisted.

Yes [ ] No [ ]

## 6 DECLARATION

I/We agree that, if appointed as resident/s, I/we shall not be a tenant(s).

Any weekly/monthly sum I/we pay will be a maintenance contribution, not rent.

To the best of my/our knowledge, I/we have given accurate and truthful answers to all of the questions in the application (including the annex) and will keep the DUC informed of any changes in my/our circumstances. I/We understand that failure to provide accurate information or to keep the DUC informed of changes could result in me/us losing the right to occupy the property.

Signed:

Name 1: ..... Print name: .....

Name 2: ..... Print name: .....

Date: .....

Did anyone help complete your application? Yes [ ] No [ ]

Name:..... Contact.....

**Please return this form along with the data protection consent form to:**  
The Manager, Dartmouth United Charities, First Floor, 3 The Quay, Dartmouth TQ6 9PS  
[info@dartmouthunitedcharities.org.uk](mailto:info@dartmouthunitedcharities.org.uk)

Thank you

## SURPLUS HOUSEHOLD INCOME CALCULATION TABLE

Please complete the table below to calculate the current total surplus income for your household (including income and expenditure for all applicants).

<b>A. Monthly Income</b>	
1. Pay (after tax)	£
2. Pensions	£
3. State benefits eg Universal Credit, Child Benefit,	£
4. Housing benefit	£
5. Tax credits	£
6. Child maintenance	£
7. Savings / investment income (interest)	£
8. Student loan / grant	£
9. Other financial support or gifts	£
<b>Total Monthly Income</b>	£ _____ <b>(Figure A)</b>

<b>B. Monthly Household Bills</b>	
1. Building / contents insurance	£
2. Council tax	£
3. Electricity	£
4. Gas	£
5. Water	£
6. Home phone /mobiles	£
7. Internet / broadband	£
8. TV license	£
9. Satellite / digital TV	£
10. Service charge	£
11. Home / garden maintenance	£
12. One-off household items	£
<b>Total Monthly Household Bills</b>	£ _____ <b>(Figure B)</b>

**C. Monthly living Costs**

1. Food shop	£
2. Household items (cleaning products ,homewares)	£
3. Snacks /takeaways	£
4. Alcohol at home, cigarettes and tobacco	£
5. Subscriptions	£
6. Clothes & shoes	£
7. Hairdressing / beauty	£
8. Launderettes	£
9. Eye-care	£
10. Dental care	£
11. Medical costs	£
12. Medical / dental insurance	£
13. One-off items	£
<b>Total Monthly Living Costs</b>	<b>£_____ (Figure C)</b>

**D. Monthly Financial Products Costs**

1. Bank interest & charges	£
2. Loan repayments / Loan payment insurance	£
3. Credit card repayments / Credit card Insurance	£
4. Hire purchase payments	£
5. Life insurance	£
6. Income protection insurance	£
7. Critical illness insurance	£
8. Long term care /funeral plans	£
9. Financial / legal advice	£
<b>Total Monthly Financial Products Costs</b>	<b>£_____ (Figure D)</b>

**E. Monthly Travel Costs**

1. Fuel	£
2. Vehicle maintenance, repairs	£
3. Road tax	£
4. Vehicle insurance	£
5. Breakdown cover	£
6. Parking	£
7. Public transport /taxi fares	£
<b>Total Monthly Travel Costs</b>	<b>£_____ (Figure E)</b>

**F. Monthly Family & Friends Costs**

1. Childcare including school fees, clubs, activities, toys and pocket money	£
2. Child maintenance payments	£
3. Support for student children	£
4. Support for other relatives	£
5. Pets including food, vet bills and insurance	£
6. Donations / sponsorships	£
<b>Total Monthly Family &amp; Friends Costs</b>	<b>£_____ (Figure F)</b>

**G. Monthly Leisure Costs**

1. Birthdays	£
2. Christmas /other celebrations	£
3. Meals /drinks out / social life	£
4. Sport / gym	£
5. Lottery / gambling	£
6. Hobbies	£
7. Days out /holidays	£
8. Travel insurance	£
<b>Total Monthly Leisure Costs</b>	<b>£_____ (Figure G)</b>

**MONTHLY INCOME AND EXPENSES CALCULATION (BEFORE CURRENT HOUSING COSTS):**

Total monthly income (insert figure A)

£

Total monthly spending (insert total of figures B to G)

- £

**MONTHLY SURPLUS INCOME (BEFORE CURRENT HOUSING COSTS)** (total income less total spending)

£ \_\_\_\_\_ (Figure H)

**Monthly Housing Costs (Current)**

1. Rent (before housing benefit)

£

2. Service Charge (if applicable)

£

3. Mortgage repayment

£

**Total Monthly Housing Costs**

£ \_\_\_\_\_ (Figure I)

**INCOME AND EXPENSES CALCULATION (AFTER CURRENT HOUSING COSTS):**

**MONTHLY SURPLUS INCOME** (before current housing costs)

£

(Figure H)

**Total Monthly Housing Costs**

- £

(Figure I)

**MONTHLY SURPLUS HOUSEHOLD INCOME** ( after housing costs)

£ \_\_\_\_\_ (Figure J)

# Dartmouth United Charities

## Data Protection Statement and consent form for almshouse residents

Dartmouth United Charities records the details of its Residents, which may contain your personal and sensitive data.

This includes:

- Information that you provide as a new or current Resident; information provided by you at the time of becoming a Resident; paying your MMC; posting a complaint, reporting and completing a repair; requesting further services and any other correspondence to us.
- Information that you provide to us to pass to Appello for the provision of their emergency call service; and for Appello to process personal data for the purpose of providing products and services.
- We also hold data regarding your application and those who live in your household. We presume that if you give us information regarding anyone else in your household then you do so with their knowledge and consent.
- Personal payment history about you, such as contact details, and MMC payment history.

We will keep your personal information in accordance with the requirements of the Data Protection Act 1998. We will not disclose the information we hold about you to any other organisation except in connection with the purposes listed. Unless the information sharing is done as part of a contract, or certain other tests are met (such as sharing information in relation to a criminal investigation), we will seek your consent to share your personal information. You have the right to obtain a copy of the personal information we hold about you. Should you wish to obtain a copy of this information, you should submit your request in writing to Dartmouth United Charities, 1<sup>st</sup> Floor, 3 The Quay, Dartmouth, TQ6 9PS.

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### Please complete

#### Permission to store your data

We are required by law to ask for your permission to record and store details of your case. These details may contain your personal and sensitive data. If you are granted a Licence to Occupy a DUC property your records will be stored in your Resident's file and some of the data may be kept in a shared electronic file. If your application is rejected we will destroy all information after 6 months. For the purposes of the Data Protection Act the Staff and Trustees of Dartmouth United Charities are Data Controllers in common.

Yes – I/We give my/our consent to Dartmouth United Charities recording sensitive personal information about me/us and for DUC to pass relevant information to Appello for use as outlined above.

Signed \_\_\_\_\_ Print Name \_\_\_\_\_

Signed \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

Please return to: Dartmouth United Charities, 1<sup>st</sup> Floor, 3 The Quay, Dartmouth, TQ6 9PS