

Please print the application form, complete all sections, sign and date, scan the form and send it to us by email to genesis.homes@genesisha.org.uk or to the sales advisor who gave you the form. Submission of the form constitutes acknowledgement by you that you have completed the form honestly and truthfully and to the best of your knowledge.



Please tick the boxes as appropriate.

SECTION 1: WOULD YOU LIKE TO BUY OR RENT?

Buy	Rent	
Shared Ownership <input type="checkbox"/>	Rent to HomeBuy <input type="checkbox"/>	
Shared Ownership Resale <input type="checkbox"/>	Market Rent <input type="checkbox"/>	
Outright Sale <input type="checkbox"/>		
Which development are you applying for?	Which area would you like to live in?	
	1. 2. 3.	
	First applicant	Second applicant
Are you a Social (Council/Housing Association) Tenant?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you current, ex-serving or partner of MoD personnel?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

SECTION 2: GENERAL DETAILS

	First applicant	Second applicant
Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Title (Mrs, Ms, Mr)		
Marital Status		
First Name		
Last Name		
Previous Name (if applicable)		
Date of Birth		
Relationship to the First Applicant		
National Insurance Number		
Address		
How long have you lived there?		
If you have lived there less than 6 months, please provide previous address		
How long did you live there?		
Home telephone number		
Mobile telephone number		
Email address		
Preferred method of contact		
What borough do you live in?		
What borough do you work in?		

Please tick the boxes as appropriate.

SECTION 2: GENERAL DETAILS CONTINUED

	First applicant	Second applicant
What is your Nationality?	UK national resident in UK <input type="checkbox"/>	UK national resident in UK <input type="checkbox"/>
Please tick ONE box which best describes your Nationality	UK national returning from residence overseas <input type="checkbox"/>	UK national returning from residence overseas <input type="checkbox"/>
*Other EEA countries are: Austria, Belgium, Cyprus, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Malta, Netherlands, Portugal, Spain, Sweden, Iceland, Liechtenstein, Norway and Switzerland	Czech Republic <input type="checkbox"/>	Czech Republic <input type="checkbox"/>
	Estonia <input type="checkbox"/>	Estonia <input type="checkbox"/>
	Hungary <input type="checkbox"/>	Hungary <input type="checkbox"/>
	Latvia <input type="checkbox"/>	Latvia <input type="checkbox"/>
	Lithuania <input type="checkbox"/>	Lithuania <input type="checkbox"/>
	Poland <input type="checkbox"/>	Poland <input type="checkbox"/>
	Slovakia <input type="checkbox"/>	Slovakia <input type="checkbox"/>
	Slovenia <input type="checkbox"/>	Slovenia <input type="checkbox"/>
	Bulgaria <input type="checkbox"/>	Bulgaria <input type="checkbox"/>
	Romania <input type="checkbox"/>	Romania <input type="checkbox"/>
	Other EU Economic Area (EEA) Country *	Other EU Economic Area (EEA) Country *
	Any other country <input type="checkbox"/>	Any other country <input type="checkbox"/>
	Refused <input type="checkbox"/>	Refused <input type="checkbox"/>

SECTION 3: DO THESE STATEMENTS APPLY TO YOU?

	First applicant	Second applicant
Do you have access to savings and able to raise at least £4000 to cover the cost of buying?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever failed to keep up a loan on any form of credit agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have any unsatisfied County Court Judgement?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you entered into an IVA (Individual Voluntary Credit Agreement)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been behind in your rent in the last twelve months?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, are you still in rent arrears?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you been declared bankrupt within the last six years?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, when:		
Are you self employed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, can you provide 2 years of audited accounts?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you own another property in the UK or abroad?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have a mortgage on any other property either in the UK or abroad?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

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Please tick the boxes as appropriate.

SECTION 4: MOD PERSONNEL? (If you are MoD, please complete)

	First applicant	Second applicant
If MoD, please state your job role		
Regular Service Personnel		
Clinical Staff (excluding doctors/dentists)		
MoD Police Officer		
Uniformed Staff in Defence Fire Service		
Full-time Reserve Service		
Surviving Partner of Regular Service Personnel who died in service in the last 12 months		
Have you successfully completed your basic phase 1 training?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
When was your start date?		
When is your discharge/retirement date?		
Ex-Regular Service Personnel		
When was your discharge/retirement date?		

SECTION 5: EMPLOYMENT DETAILS?

(HOLD applicants may not be able to complete the employment section)

If you are a HOLD applicant please ask for an additional form.

	First applicant	Second applicant
Job title/Occupation/Grade		
Employer's name, address and postcode		
Are permanently employed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you employed on a fixed term contract?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contract start and finish date?		
Are you employed on a temporary contract?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contract start and finish date?		
How long have you worked in your current role?		
How long have you been in your current profession?		

Please tick the boxes as appropriate.

SECTION 6: FINANCE

Please note that there are maximum income thresholds, depending on your circumstances.

Income:	First applicant	Second applicant
What is your total annual salary before deductions? (This should include London weighting, excluding overtime bonuses)	£	£
If applicable, please state how much you earn in overtime, bonuses and commissions annually	£	£
If applicable, please state a monthly figure for any other source of income you may have	£	£
If applicable, please state a monthly figure for your income from working tax credits, child benefits, disability allowance	£	£
If applicable, please state a monthly figure for your guaranteed income from maintenance payments	£	£
Total savings	£	£
How much are you able to contribute towards a deposit	£	£

Expenditure:	First applicant	Second applicant
Do you have any loans or hire purchases?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, how much is the outstanding amount?	£	£
How much are the monthly repayments?	£	£
What is the loan for?		
What date is the final repayment?		
If applicable, what is the total balance on your credit cards?	£	£
How much do you pay monthly in rent, mortgage or board?	£	£
How much child maintenance do you pay as a result of a court order?	£	£

SECTION 7: RESIDENCY

	First applicant	Second applicant
Are you a British or European Union/ European Economic Area Citizen?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have Indefinite Leave to Remain in the UK?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
When does your Leave to Remain in the UK end?		

Please tick the boxes as appropriate.

SECTION 8: YOUR CURRENT ACCOMMODATION

What is your current accommodation? If you are currently or have been a homeowner you may need to provide further information.

	First applicant	Second applicant
Council tenant		
Housing association tenant		
What is the name, address and telephone number of the council or housing association you are renting through?		
Renting privately		
Temporary accommodation provided by your local authority		
A current homeowner		
A current shared owner		
A previous homeowner		
Renting from your employer		
Living with family and friends		
Are you on a council waiting list?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please state which council waiting list(s) (You must include documentation to confirm this)		
What is your council waiting list reference number?		

SECTION 9: WHO ELSE WILL BE LIVING WITH YOU?

Resident one

Name	Sex Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of birth
What is their relationship to you?	Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Child* <input type="checkbox"/> Sibling <input type="checkbox"/> Friend <input type="checkbox"/> Parent <input type="checkbox"/>	*If yes, is this a foster child? Yes <input type="checkbox"/> No <input type="checkbox"/> Carer <input type="checkbox"/> Other <input type="checkbox"/>
Employment status	Full-time education <input type="checkbox"/> Working <input type="checkbox"/>	Unemployed <input type="checkbox"/> Student <input type="checkbox"/>
Will they be contributing to the mortgage payments?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Will they be contributing to the rent payments?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
What is their annual salary? £	What are their total savings? £	
Do they own a property in the UK or overseas?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other children/dependants with relationship age and date of birth info to be captured		

Please tick the boxes as appropriate.

SECTION 9: WHO ELSE WILL BE LIVING WITH YOU? CONTINUED

Resident two

Name	Sex Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of birth
What is their relationship to you?	Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Child* <input type="checkbox"/> Sibling <input type="checkbox"/> Friend <input type="checkbox"/> Parent <input type="checkbox"/>	*If yes, is this a foster child? Yes <input type="checkbox"/> No <input type="checkbox"/> Carer <input type="checkbox"/> Other <input type="checkbox"/>
Employment status	Full-time education <input type="checkbox"/>	Working <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/>
Will they be contributing to the mortgage payments?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Will they be contributing to the rent payments?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
What is their annual salary? £	What are their total savings? £	
Do they own a property in the UK or overseas?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other children/dependants with relationship age and date of birth info to be captured		

SECTION 10: RENT TO HOMEBUY

To be eligible for Rent to HomeBuy you must agree to the following terms and conditions set out below

Both applicants	
I agree to save the discount from my rent towards a deposit	Yes <input type="checkbox"/> No <input type="checkbox"/>
I am committed to entering into home ownership through low cost home ownership products within 5 years of my tenancy	Yes <input type="checkbox"/> No <input type="checkbox"/>
I/We have read and understood the eligibility criteria agree to the conditions of Intermediate Rent	Yes <input type="checkbox"/> No <input type="checkbox"/> Date

SECTION 11: DECLARATION OF INTEREST

Is either applicant related to a current or former committee/board member or Genesis Housing Association employee?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, please tell us their name	
What is your relationship to this person?	Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Child <input type="checkbox"/> Sibling <input type="checkbox"/> Friend <input type="checkbox"/> Other <input type="checkbox"/>

Please tick the boxes as appropriate.

SECTION 12: EQUALITY QUESTIONS

	First Applicant (left box) – Second Applicant (right box)
<p>What is your ethnic group?</p> <p>Please tick ONE box which best describes your ethnic group or background</p> <p>It is against the law (Equality Act (2010) and the terms of our Single Equality Scheme to discriminate against anyone because of their disability, maternity or paternity, race, religion or belief, sex (i.e. gender), or sexual orientation. In order to ensure that we do not directly or indirectly discriminate against any group or individual, we need to keep records. If you do not answer these questions it will not affect your application in any way. Sensitive personal data such as ethnic background, age and physical or mental disabilities are required under the Equal Opportunities Monitoring statute.</p> <p>Under section 29(3) of the Data Protection Act 1998 the information may be disclosed for purposes of crime prevention.</p>	<p>White</p> <p>English/Welsh/Scottish <input type="checkbox"/><input type="checkbox"/> Irish <input type="checkbox"/><input type="checkbox"/> Gypsy/Irish Traveller <input type="checkbox"/><input type="checkbox"/> Northern Irish/British</p> <p>Other <input type="checkbox"/><input type="checkbox"/> Refused <input type="checkbox"/><input type="checkbox"/></p>
	<p>Mixed/Multiple Ethnic Groups</p> <p>White & Asian <input type="checkbox"/><input type="checkbox"/> White & Black African <input type="checkbox"/><input type="checkbox"/> White & Black Caribbean <input type="checkbox"/><input type="checkbox"/> Other <input type="checkbox"/><input type="checkbox"/> Refused <input type="checkbox"/><input type="checkbox"/></p>
	<p>Asian/Asian British</p> <p>Pakistani <input type="checkbox"/><input type="checkbox"/> Indian <input type="checkbox"/><input type="checkbox"/> Bangladeshi <input type="checkbox"/><input type="checkbox"/> Chinese <input type="checkbox"/><input type="checkbox"/> Other <input type="checkbox"/><input type="checkbox"/> Refused <input type="checkbox"/><input type="checkbox"/></p>
	<p>Black/African/Caribbean/British</p> <p>African <input type="checkbox"/><input type="checkbox"/> Caribbean <input type="checkbox"/><input type="checkbox"/> British <input type="checkbox"/><input type="checkbox"/> Refused <input type="checkbox"/><input type="checkbox"/></p>
	<p>Other Ethnic Group</p> <p>Arab <input type="checkbox"/><input type="checkbox"/> Refused <input type="checkbox"/><input type="checkbox"/></p>

	First applicant	Second applicant
What is your religion?	No religion <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Refused <input type="checkbox"/> Other <input type="checkbox"/>	No religion <input type="checkbox"/> Christian <input type="checkbox"/> Buddhist <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Refused <input type="checkbox"/> Other <input type="checkbox"/>
Do you consider you or any member of your household to be disabled?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you or any member of your household registered disabled?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you or any member of your household a wheelchair user?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is your sexuality?		

SECTION 13: CONTACT

First applicant	Second applicant
How did you hear about Genesis Housing Association?	

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Please tick the boxes as appropriate.

IMPORTANT INFORMATION : PLEASE READ

Ensure that you sign and date this form before returning it.

Genesis Housing Association will collect, store and process your personal data in accordance with the Data Protection Act 1998. Sensitive personal data collection such as racial or ethnic origin, offences (including alleged offences) and physical and mental disabilities are required under the Equal Opportunities Monitoring statute.

Credit Checking

We may contact credit reference agencies to authenticate and verify your identity and credit status: these agencies will also keep a record of any such request. The scope and the extent of the gathering of information from third parties depends on what type of service you are requesting from us. By signing this, you consent to your personal data being gathered in this way.

Sharing your data

We may share this information with other organisations that handle public funds or third parties associated with your purchases/ rental: this is for verification of details, and to prevent and detect fraud and/or crime.

The information may be used for surveys. We may disclose information to government departments, research organisations or agencies working on our, and on their own behalf, who may contact you.

We may take up any references relating to your application from your landlord and/or employer.

All information we collect on you may be shared with the above parties in relation to this application, and only shared with other parties where there is a legal obligation to provide it or we have your consent to use the information for other purposes.

DECLARATION

I/we understand that:

- It is a criminal offence to knowingly or recklessly make a false declaration or withhold information in connection with this application.
- If it is found that false information has been given to obtain housing either knowingly or recklessly appropriate legal action may be taken by us or a local authority and/or seek possession of any leasehold tenancy.
- As a council, housing association or other public sector tenant, I/we will be required to give up my rented home on the day of completion if I buy or rent through any low cost home ownership product.
- If I/we own or have an interest in a property now or previously, I/we will be required to sell before exchange of contracts or taking up a lease.
- I authorise Genesis Housing Association to pass information to credit reference agencies and to estate agents who may be able to assist in locating properties for applicants.
- If any of the information provided changes I will inform Genesis Housing Association.
- I/we authorise Genesis Housing Association to send me/us promotional material for new homes and events.
- I/we certify that I am/we are not employed by any subsidiary of Genesis Housing Group Limited, and have not been employed by any subsidiary of Genesis Housing Group Limited in the last 12 months and that I am/we are not related to an employee or ex-employee or board member of any subsidiary of Genesis Housing Group Limited.

I/we have read the above and confirm that I/we have provided accurate and up to date information relating to my/our application for home ownership.

First Applicant

Signed

Date

Second Applicant

Signed

Date

- Please check you have filled in all sections, otherwise the form will be returned to you.
- If you need help filling in this form, please contact us.

Atelier House
64 Pratt Street
London NW1 0LF

call **033 3000 4000**
email genesis.homes@genesisha.org.uk

or visit our website on www.genesishahomes.org.uk

