

Transfer application form

Tenancy reference number

Details of household members to be included in the application

Title	First name(s)	Surname	Gender	Date of birth	Relationship to Tenant

*If this is different to the household composition when you moved into the property, please provide evidence that all adults above the age of 18 have the Right to Rent. (Please see <https://www.gov.uk/government/publications/how-to-rent> for further information.) If you have had additional children, please provide copies of their full birth certificates.

You must also provide evidence for all adults above the age of 18 who have been living at the property as their sole and principle home for past six months. (See below for guidance on evidence required.)

Proof - please provide one from each area	Evidence
Proof of ID	<ul style="list-style-type: none"> Current passport - British or EEA/Swiss National passport/identity card. Registration certificate or document certifying permanent residence of EEA/Swiss National EEA/Swiss family member permanent residence card. <p>If none of the above are available both of the following will be required:</p> <ul style="list-style-type: none"> British driving licence Full birth certificate <p>For all children over eight, either a passport or birth certificate will be required.</p> <p>A passport photograph for all household members/tenants over the age of eight is required.</p>

Proof - please provide one from each area	Evidence
Proof of Right to Rent - this is required for all new occupants.	<p>Evidence must be provided for each adult over 18 in the household.</p> <p>All non-EU citizens need to provide this.</p> <p>Evidence:</p> <ul style="list-style-type: none"> • Biometric Residence Permit with unlimited leave. • Passport or travel document endorsed with unlimited leave. • UK immigration status document endorsed with unlimited leave. • A certificate of naturalisation or registration as a British citizen.
Proof of residency	<p>Tenants and all other household members aged 18 years and over will need to provide evidence from the following list to cover the last 6 months:</p> <ul style="list-style-type: none"> • Council tax/utilities bill. • Wage slips/P60. • Bank statements must be provided for your principal bank account which has your income paid into it, whether that is salary, benefits or pension etc. These statements must be originals or duplicates provided by the bank (re-issued copies of statements are not accepted). • Full credit report. • Other official correspondence showing address will be considered.

Contact details

Address

Home telephone number

Mobile number

Work telephone number

Email address

Next of kin

Name

Address

Contact details - Tel/mobile number

Email address

Relationship to applicant

Details of property where the applicant is currently living

What type of accommodation are you are currently living in? For example house/flat/maisonette/townhouse/duplex etc.

Number of bedrooms

Number of double bedrooms

Number of single bedrooms

On which floor(s) is the property?

How many stairs are there inside your home?

How many external stairs are there, in communal areas?

Is there a lift? Yes No

If you would like to transfer as your current property is physically not suitable for you please provide details in the box below (e.g. there are too many internal stairs).

Please state how your medical needs will be addressed by moving and what difficulties you are currently having in your existing home.

Reasons for transfer

Please provide information on why you are applying for a transfer and attach any supporting documentation.

Please note that where supporting evidence is required, we will accept letters from GPs, specialists, Social Services, Children and Adolescent services, schools and copies of prescriptions.

Medical details

Please provide details of any medical conditions which are causing you problems in your current home. If there is more than one household member who has medical conditions which are causing them to need to move home, please complete further separate sections below.

Please continue on a separate sheet for any of the questions below, if necessary, and attach to this form.

Household member 1

Name	Relationship to Tenant	Date of birth	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Diagnosis

Please provide details of any diagnosis by a doctor or health professional, including date of diagnosis using the exact wording that has been used.

History of the condition

If there have been any changes in diagnosis, please give dates and details of this.

How is your current mobility?

For instance do you use a wheelchair, crutches, walking stick, rollator or scooter. If so, please give details in the box below.

Treatment type

What medication/therapy are you taking?

What condition does it treat?

How often do you have to take your medication?

How long have you been taking your medication for?

When is it due to stop/or is ongoing?

Specialist/hospital referral

if you are receiving treatment from a specialist, please provide details on what treatment this is, how regularly received and names, addresses and job titles of those providing the treatment.

If you have mental health issues and have a case plan in place, please provide a copy of this.

Household member 2

Name	Relationship to Tenant	Date of birth	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Diagnosis

Please provide details of any diagnosis by a doctor or health professional, including date of diagnosis using the exact wording that has been used.

History of the condition

If there have been any changes in diagnosis, please give dates and details of this.

How is your current mobility?

For instance do you use a wheelchair, crutches, walking stick, rollator or scooter. If so, please give details in the box below.

Treatment type

What medication/therapy are you taking?

What condition does it treat?

How often do you have to take your medication?

How long have you been taking your medication for?

When is it due to stop/or is ongoing?

Specialist/hospital referral

if you are receiving treatment from a specialist, please provide details on what treatment this is, how regularly received and names, addresses and job titles of those providing the treatment.

If you have mental health issues and have a case plan in place, please provide a copy of this.

Household member 3

Name	Relationship to Tenant	Date of birth	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Diagnosis

Please provide details of any diagnosis by a doctor or health professional, including date of diagnosis using the exact wording that has been used.

History of the condition

If there have been any changes in diagnosis, please give dates and details of this.

How is your current mobility?

For instance do you use a wheelchair, crutches, walking stick, rollator or scooter. If so, please give details in the box below.

Treatment type

What medication/therapy are you taking?

What condition does it treat?

How often do you have to take your medication?

How long have you been taking your medication for?

When is it due to stop or is it ongoing?

Specialist/hospital referral

if you are receiving treatment from a specialist, please provide details on what treatment this is, how regularly received and names, addresses and job titles of those providing the treatment.

If you have mental health issues and have a case plan in place, please provide a copy of this.

Type and location of property required

If there is a reason why you cannot live in a certain area please state and provide supporting evidence of this and if you require a different type of property than you currently occupy we will require supporting evidence of this.

Please state supporting evidence

Wheelchair accessible

Mobility standard

Aids and adaptations

Your boroughs of choice

We have the largest number of properties in Islington, Haringey, Hackney. We have fewer properties in Waltham Forest, Enfield, Camden and Redbridge.

Declarations

Section 214 of the Homelessness Act 1996 makes it an offence for you to withhold information that we reasonably require to assess an application or to provide false information that leads to your gaining a tenancy. Ground 5 of Housing Act 1985 and Ground 17 of Housing Act 1988 also enables Newlon Housing Trust to seek possession should it emerge that we were induced to grant the tenancy based on a false statement.

We will take every legitimate action against anyone who gains a tenancy through knowingly or recklessly providing false information.

Please sign below only if you agree with all the following statements:

- I/we have checked the information I/we have supplied. It is correct and complete to the best of my/our knowledge.
- I/we understand that it is my/our responsibility to tell Newlon Housing Trust immediately if there are any changes in any circumstances that may affect this application.
- I/we give permission for you to make enquiries about me/us to assess my application for housing and prevent fraud.
- I/we understand that one of the consequences of giving false information on this form is that Newlon Housing Trust may go to Court to regain possession and evict me/us from any tenancy gained through my/our giving false information.

Are you, the tenant (or the joint tenants), related to a Newlon staff/committee member?

Yes

No

Do you, the tenant (or joint tenants) have a legal interest in another property?

Yes

No

(Though exceptions may be made, Newlon Housing Trust does not grant tenancies where an applicant is already the legal owner in part or in full of any other property or dwelling-place in the UK, or holds any other form of tenancy for another property.)

Do you, the tenant (or joint tenants), agree to update Newlon Housing Trust before any such legal interest in another property is entered into in the future, or any change in circumstances?

Yes

No

We stress that Newlon Housing Trust may seek possession where a tenancy has been obtained by a false statement made knowingly or recklessly. We urge you to check your understanding of the contents of this document, and the truthfulness of your answers. We also remind you of the criminal sanctions available under the Prevention of Social Housing Fraud Act 2013 (e.g. for unlawful subletting etc). Newlon Housing Trust may seek possession of the property as this is a breach of Ground 17 of Schedule 2 to the Housing Act 1988. This ground can be used where the landlord has been induced to grant a tenancy by a false statement made knowingly or recklessly by a tenant.

I/we certify that all the information I/we have given on this application is true in every detail.

Signature (Tenant 1)

Name (printed)

Date

Signature (Tenant 2)

Name (printed)

Date

Privacy and data protection

Newlon is committed to managing residents' personal data securely in line with the GDPR. Information about how we manage and store your data, details of our Data Protection Officer and your rights in relation to any personal data we hold can be found in our privacy notice for residents which you have been provided with a copy of. From time to time we may need to update our privacy notice and you can check the latest version at www.newlon.org.uk/residents/data-protection.

In line with our privacy notice there are some instances when we need to securely share your personal data with third parties. This includes the processing of transfer applications, as we will share the details you provide with our specialist independent medical assessment service.

Continuation sheet

A large, empty rectangular box with a thin black border, intended for providing additional information or details on a continuation sheet.