

CASTLETOWN TOWN COMMISSIONERS

HOUSING TRANSFER APPLICATION

I / We desire to be included on the Housing Transfer List and submit the following information:

1. Applicant (full name) _____

2. Partner _____

3. Address _____

4. Children

Sex	Age

5. **Transfer to:** *(delete inapplicable)*

James Road Flats	James Road Houses	Malew Street
Westhill Avenue Houses	Westhill Avenue Bungalows	School Hill Avenue Houses
School Hill Avenue Bungalows	Maynrys	Mill Street Houses *
Mill Street Flats *	Farrants Park	Smetana Close

NB * The above mentioned Mill Street properties are not connected with the Elderly Persons Sheltered Housing Complex. Application for such housing must be made to the Castletown & Malew Elderly Persons Housing Committee. Forms are available from the Civic Centre General Office.

Reasons for transfer request:

Signed _____ Dated _____