# Housing Waiting List Southern Region

Application Form and Guidance Notes

September 2016 Rev 1.0

# Housing Application Part 1 - Guidance Notes

Part 1 of this form should be treated as guidance only for completion of the waiting list application form.

You may also qualify to be included on The First Time Buyers List. Inclusion on this list will not prevent you from being on the Public Sector Housing waiting list, and you should contact the Department of Infrastructure Customer Services team for more information (01624) 685955.

Please read these notes **prior** to completing the application form.

#### 1. Acceptance Criteria

- The normal residential qualifications for acceptance on the waiting list and/or allocation of accommodation are:
  - a) Minimum of 10 years residence in the Isle of Man; and
  - b) Minimum of 5 years residence in the area of the combined housing waiting list
- The residential qualifications do not need to be continuous or immediately prior to the application. (but you will be required to provide proof of residence).
- Your total income must not exceed £33,555 per annum, including that of your spouse, partner or fiancé(e) with no children, £36,375 with one child, £39,185 with two children and £41,990 with three children.
- At least one of the applicants must be 18 years of age.

#### 2. Allocation Criteria

- With regard to the allocation of properties a points system is applied to every housing application.
- The aim of the points system is to assess each applicant by a common set of standards in relation to their housing needs.

#### 3. Application Form

- The application form should be completed in block capital letters
- All questions **must** be answered. (If the answer is "none" state "none" or if not applicable state "n/a"). Or enclose relevant supporting documentation.
- **Failure** to complete any part of the application form **will** result in the form being returned to the applicant without consideration.
- You should include details of all addresses and years of residence at previous addresses you have lived in, as failure to do so could affect your housing points and increase your waiting time.

#### **Question 1 – Applicant Details**

• In order to be considered, the full name of all applicants must be given.

#### **Question 2 – Applicant's Status**

• If you are married or have a partner and intend to live together, your application will be assessed jointly. However, any tenancy offered will only be joint if both parties meet the residential criteria.

#### **Question 3 – Current Address**

• You must provide a current utilities bill, bank statement, or similar showing your present address when submitting your application.

#### Questions 4 and 5 – Date/Place of Birth

• You must provide original or certified copies of birth certificates for each applicant and any other persons requiring housing with you.

#### **Question 6 – Number Of Years Resident On The Island.**

- Details must include all addresses, and whenever possible the dates of residency should include month and year (e.g. May 2005).
- You may be asked to supply some proof of your previous addresses.

#### Question 7 - Number of Years Resident in the Housing Area.

• The total time residing in the regional area which falls within the boundaries of the combined housing waiting list need not be continuous or immediately prior to the application but must total five years or more.

#### **Questions 8 And 9 – Occupation and Employer**

- You will be required to submit a minimum of three most recent payslips to support your application.
- If you are self-employed you should note that it is not permitted to carry on any trade, profession or business from a public sector property without prior approval from the Department of Infrastructure or Local Authority (the 'housing providers').

#### **Question 10 – Weekly Income**

- Income is based on all gross income (this is before tax and deductions). The applicant(s) must submit at least three recent wage/salary slips, in respect of each of the applicants, as evidence of income, plus proof of any benefits, including child benefits, and/or pensions.
- If you are self-employed you will need to show your previous two years' audited accounts. If audited accounts are unavailable, please submit copies of your income tax assessment(s). You may be required to provide authority to approach the tax office for confirmation of proof of income.
- Where an applicant is in receipt of benefits, a copy of the most recent award letter must be provided. Submission of the application form implies approval for the housing providers to approach Social Security to verify details of any benefits received by the applicant(s).

#### Question 11 - Savings

- You must provide details of all your savings and any investments which you may have.
- This should include the proceeds of sale of a previous property whether solely or jointly owned.

#### Questions 12 and 13 - Other Persons Requiring Accommodation/Housing

• You must provide original or certified copies of birth certificates for each applicant and any other persons requiring housing with you.

#### **Question 14 – Accommodation Required (Refer to enclosed map)**

- It is important you think carefully about where you would like to live, as **unjustified refusal** of a property offered will result in a deduction of housing points.
- Please indicate clearly the areas you wish to be considered for in Question 14. Also refer to the map on page 16 for guidance. Applicants may have up to 4 choices according to their housing need.
  - 1) Anywhere in the South of the Island (all 6 Parishes excepting Port St Mary)
  - 2) A specific Parish or Parishes in the South up to 3 choices (excepting Port St Mary)
  - 3) A choice of 2 parishes outside of the Southern Region
  - 4) Anywhere on the Island

**Note:** if you indicate a preference for a Parish and subsequently reject an offer of accommodation without good reason, you may have points deducted for unjustified refusal.

For example:	
An applicant wishes to be offered a property from anywhere in the	Tick the box " I will live anywhere in the South" only
southern region *	You will then be considered for all 6 Southern Parishes.
*Excepting <b>Port St Mary</b> which is not on the combined list.	*applicants wishing any of their choices to be Port St Mary <b>must</b> apply through <b>Port St Mary</b>
	Commissioners Offices and will not be eligible for inclusion onto the combined housing list
An applicant wishes to be offered a property from anywhere in the	Tick the box " I will live anywhere in the South"
southern region but has a preference for where they would like to live.	Complete Choice 1 through to Choice 3 in order of priority to you.
	For example – 1 <sup>st</sup> preference: Castletown, 2 <sup>nd</sup> Malew, 3 <sup>rd</sup> Rushen
An applicant wishes only to be offered a property from a selection	Do NOT tick the box " I will live anywhere in the South"
of parishes of their choosing within the southern region.	<ul> <li>Complete Choice 1 through to Choice 3 in order of priority to you. Choice 1 only where you have only one selection, Choice 1 and Choice 2 for 2 selections etc</li> </ul>
An applicant would additionally consider a DOI property outside the southern region	<ul> <li>Refer to the map on page 16 for other parishes shown in white (numbered 1-11) and complete the section for Parish 1 or Parish 2</li> </ul>
	For example – 1 <sup>st</sup> preference: Bride, 2 <sup>nd</sup> Jurby
An applicant would be prepared to be offered a DOI property anywhere on the island	Tick the box " I will live anywhere on the Island"

#### **Question 15 – Present Accommodation**

- You must produce your rent book if you are currently in, or have recently left rented accommodation. If you do not have a rent book, then please provide the name and address of your landlord.
- As part of the assessment process an Officer from any of the housing providers, or other agency, e.g. Environmental Health, may be required to carry out an inspection of your present accommodation to evaluate any particular difficulties relating to such accommodation.
- The submission of the application form will imply approval to such an inspection which, if necessary, will be arranged at a mutually convenient time.

#### **Question 16 – Details of Property Ownership**

- Owners/occupiers (existing or recent) are not automatically barred from applying for public sector housing; however, the applicant(s) will need to satisfy the housing provider that they have an urgent and compelling need to be rehoused and are not in a financial position to provide their own private accommodation.
- If you are still living in the property or still co-own the property but are not living in it, you must provide a recent valuation of the property, along with proof of any mortgages and/or charges against the property.
- In the case of recent owner/occupiers, a document provided by the Advocate for the applicant(s) stating the reason(s) for selling, the selling price of the property and proceeds received by the applicant(s) will also need to be submitted.
- Where the property is the subject of a divorce or legal separation, upon completion of divorce/legal separation proceedings, it will be necessary to show the legal documentation in relation to the settlement.
- The acceptance of an owner/occupier (existing or recent) may be subject to special conditions laid down by the housing provider.

#### **Question 17 – Family Members Living Separately**

• Proof of members of immediate family living separately due to lack of suitable accommodation, etc, can include separate rent books, and proof of address details as for question 3.

#### **Question 18 – Medical Conditions/Special Needs**

- You must provide us with a 'Support for Rehousing' form from a health/welfare professional (e.g., Social Worker, Health Visitor, etc) to support any claim that your health or any member of your family's health or welfare is affected by your current accommodation, or if a particular type or location of accommodation is required on health grounds.
- You may be required to fill in a more detailed form in relation to your disability/problem in order that the housing providers can fully assess your housing needs.

#### **Questions 19 And 20 – Notice to Quit/Possession Orders**

• You should provide, if applicable, a copy of any legal Notice to Quit or Court Order for possession, to leave your present accommodation. (This is not just a simple letter from your landlord requesting that you leave the property).

#### **General Information**

- You should read the declaration carefully at the end of the form before signing.
- Any information given in the application form may require substantiation and may require the submission of further supporting evidence.
- It is the responsibility of the applicant to notify the housing providers of any change in circumstances which may affect their application.
- Your housing application will be reviewed on an annual basis and you will be required to submit current payslips and to notify the housing providers of any change in circumstances. It is the applicant's responsibility to keep the housing providers up to date with any changes which may affect your application, particularly with regards to change of address.
- If the housing provider is unable to contact you at the address given, you may miss an opportunity for housing and your name will be removed from the housing waiting list.
- The application form must be signed by the applicant, or in the case of a joint application, by both parties.
- Your completed housing application form may be returned to any Local Authority offices (excepting Post St Mary Commissioners offices), including the Housing Office, Department of Infrastructure.

#### Address details:

Department of	Port Erin	Castletown Town
Infrastructure	Commissioners	Commissioners
Housing Office	Commissioners Office	Town Hall & Civic Centre
Markwell House	Bridson Street	Farrants Way
Market Street, Douglas	Port Erin	Castletown
IM1 2RZ	IM9 6AN	IM9 1NR
Tel: 685955	Tel: 832298	Tel: 825005
e-mail:	e-mail:	e-mail:
housing@gov.im	housing@porterin.gov.im	housing@castletown.gov.im

• Any questions in relation to the completion of the form may also be addressed to any of the housing offices above either by post, by telephone (telephone: (01624) 685955), or by prior appointment.

Please read the following notes carefully before completing the application form.

# Housing Application Part 2 – Application Form

## Difficulty with forms or just want advice? The Housing Officer will help in private – just ask

- A. Please make an appointment with a Housing Officer from any of the contacts on page 6 or ask at the relevant town hall or the public counter at Markwell House in Douglas.
- B. If you have difficulty communicating with us in any way, please contact us (or ask a friend or helper to contact us) for alternative arrangements to be made. We can provide forms and information in other formats (large print, Audio and Braille). Please call Customer Services on (01624) 685955 or e-mail <a href="mailto:housing@gov.im">housing@gov.im</a>

**Confidential** 

### **Southern Region**

### **Housing List Application Form**

(The Housing Act 1955 To 1976)

Please read these notes before completing the application form

- 1. Complete in **block capitals**
- 2. All questions must be answered.
- 3. You or your spouse/partner/fiancé(e) must have resided in the Isle of Man for a period of at least ten years, five of which must have been spent in an area where Port Erin, Castletown and/or the Department of Infrastructure is the housing provider.
- 4. If you are married or have a partner and intend to live together, your application will be assessed jointly. However, any tenancy offered will only be joint if both parties meet the residential criteria.
- 5. If you fail to declare a partnership in which you intend to live together then you will knowingly be committing a criminal offence.
- 6. Your gross income must not exceed £33,555 per annum, (£36,375 if you have one child, £39,185 if you have two children or £41,990 if you have three or more children) and must include income of your spouse, partner or fiancé(e).
- 7. You should include with this application form any information in support of your application, (such as a Notice to Quit, Court Order for Possession etc.) or provide a written account of your circumstances at section 22.
- 8. Applications will not be considered from single people under the age of 18. Single applicants accepted onto the waiting list should be aware that it maybe some time before suitable accommodation becomes available.
- 9. If you are self employed you should note that you will not be permitted to carry out a trade, profession or business from a Public Sector Property without the prior approval of the housing provider.

<b>Applicant Deta</b>	ails			
Please complete in BLOCK CAPITALS	Appl	icant	Spouse/	Partner/Fiancé(e)
1. Full name	Surname		Surname	
	First Name(s)		First Name(s)	
	Title: Mr / Mrs / Miss / Other (please specify)	Ms /	Title: Mr / Mrs / M Other (please spe	
Previous name (if applicable):	(First Name)	(Surname)	(First Name)	(Surname)
Contact details		1		
Home Telephone No:				
Mobile No:				
Work No:				
Email Address:				
2. Status (Delete as appropriate)		idowed / Separated / aged / Partners		ed / Widowed / Separated / / Engaged / Partners
3. Current Address				
Date from:				
4. Date of Birth				
5. Place of Birth				
6. No. years resident on island		Years		Years
Previous addresses				
You should show all addresses and dates that you lived there.	(From	To)	(From	То)
Please continue on a separate sheet if necessary	(From	To)	(From	
7 No of war	(From	To)	(From	)
7. No. of years resident in the authority area	No of Years		No of Years	
8. Occupation				
National Insurance No:	/ /	1 1	/	/ / /

9. Employer (if applicable)						
10. Weekly income at	the time of appl	lication	<u> </u>			
(you will be required to proc requested. If you are self-e						confirmation as
requested. If you are self-e	Appli		rious two			/ Fiancé(e)
Basic wage	£		£		-,	,
Regular overtime	£		£			
<b>Pensions</b> (widows or retirement)	£		£			
<b>Benefits</b> Child Benefit	£		£			
Income Support	£		£			
EPA	£		£			
Other (i.e. DLA)	£		£			
Maintenance	£		£			
Other income (please specify)	£		£			
11. Savings						
		Арг	olicant		Spouse/Pa	rtner/ Fiancé(e)
<b>Do you have any sav</b> (Delete as necessary)	rings?	Yes		No	Yes	No
Do you have any ass excess of £50,000? (	•	Yes		No	Yes	No
This should include the net If 'yes' please forward bank		•			•	ntly owned.
Other Persons re	equiring acco	ommoda	ition			
12. Number of childre	n in the family (	pre-school a	nd in f	ull time	education)	
Surname	First name	I A	\ge	Date o	f Birth	Male/Female
1.						
2.						
3.						
4.						
5.						
13. Names of any other		ing housing	y with	_	-	
Please specify the relationship w the applicant i.e. son / daughter	/in			Full nan	ne	
employment / relative / lodger el (Continue on a separate sheet if necessary)	Relationship			Relation	nship	
Basic wage	£			£		

Regular overti	me	£				£			
Pension		£				£			
Benefits		£				£			
Other income		£				£			
Accommoda	tion red	wired							
14. Area in which			nlesce re	efer to man	n n	age 16)			
14. Alea III WIIICII			•	ed Southern			actiotown De	ort Erin	Malow etc
SOUTHERN REGION	I will live a in the SO	•	Choice			oice 2		hoice	
KEGION	Please tick bo	ox if YES							
Please note – the and Santon. Points first, second or thir	will be dedu								
If you are prepared options in parishes	outside the	South by co	ompleting	your choice	of I	Parish in t	he boxes	belo	W
e.g. Andreas, Laxey, Maug	hold ,etc. see w	hite areas of ma	ap on page	16. You can selec	t a m	aximum of tw	o Parishes o	only or a	ALL ISLAND.
Parish 1				Pari	sh 2				
I will live anywhere	on the Islar	nd <i>Please tick</i>	k box if YES	5					
Type of accommoda	tion required	d (delete as ne	ecessary)	House	2	Bu	ngalow		Flat
Number of Bedroom		`	,,	One		wo	Three	١	More than 3
Please state if you h	ave any spe	cial needs			Yes	;		1	No
Details of pr	esent a	ccomm	odati	on					
<b>15. Do you live in</b> If <b>no,</b> please go			on?	Y	es				No
Is the tenancy in you	ur name?			Υ	es				No
If <b>no</b> , give details of	your preser	nt circumsta	inces						
(such as living with p	•	_							
etc) Use a separate	•		•						
If <b>yes</b> , please compl	lete the follo	wing (delete	where app	olicable):					
The property is a				Flat		Bund	galow		House
The property is				Furnishe	d		ırnished		Part
If a flat, the property	y is on the			Ground Floor	1	Lst Floor	2 <sup>nd</sup> Flo	or	3 <sup>rd</sup> /4 <sup>th</sup> Floor
How many bedroom				1	Ĺ	2		3	Over 3
Do you have central	heating?			Y	es			N	0
Do you have a coal f					es			N	0
Do you have hot wa	ter?			Y	es			N	0
Do you have a bathr					es			N	
Do you have a toilet		n use?			es				0
Do you have a share					es			N	0
What is your weekly		_		£					
Are there any defects					es				0
If yes, have you req	uested the o	wner to rec	tify?	Y	es			N	0

What are these defects?				
Please provide details of who owns the property and what action has been taken to rectify the defects, using a separate sheet if necessary	Landlord name and contact deta  Action taken to rectify defects:	ils:		
<b>Details of prope</b>	rty ownership (if ap	oplicable)		
16. Do you or your spo own a property? (do If no, please go to Q	elete where applicable)	Yes	N	0
If <b>yes</b> , is it owned		Solely	Joir	ntly
Address of property:		Amount of mortgage/ loans outstanding on the property  Value of property	£	
Have you or your spous previously owned a pro		Yes	N	0
	er separate cover, details of s, date of sale, net sum afte			
Special circums	tances relating to	application		
<b>17.</b> Are there any member because of lack of suit	rs of your immediate family able accommodation?	separated from you	Yes	No
If <b>yes</b> please give detail	S:			
special needs which ar	er of your family suffer from re affected by your present a ar type or location of accom	accommodation or which	Yes	No
	ealth Professional or Social V Special Housing Needs Self	•	• •	
19. Are you under written	Notice to Quit?		Yes	No

<b>20.</b> Has an application been made to the courts for a Possession Order against you? If <b>yes</b> you must supply a copy of the Notice to Quit or Possession	Yes	No
Order with this application.		
<b>21.</b> Have you or your spouse/partner applied to any other housing authority for	Yes	No
accommodation?		i

If **yes**, what was the outcome of that application?

### **Additional Information**

**22.** Please provide any additional information which you think may support your application.

(Continue on a separate sheet if necessary)

#### Please read the following carefully before signing the declaration.

This form fully completed should be taken to or posted to the addresses shown below. If you are unable to complete the form or provide any necessary enclosure you should seek advice from your housing provider as indicated on page 6. Receipt of this form does not imply acceptance onto the housing waiting list. You will be notified of the decision in writing.

If your application is refused you should write to via the housing provider to the southern group requesting a review of the decision, which will be determined by the Director of Housing, Department of Infrastructure, Markwell House, Market Street, Douglas, IM1 2RZ. If the decision is upheld upon review, you may then seek an appeal against that decision by lodging such appeal with your grounds for appeal in writing to the Director of Housing within 30 days of the review decision. Your appeal will be heard by an independent Member of the Legislature appointed by the Council of Ministers.

Allocation of properties is undertaken using a points system common to all housing authorities on the island. You will be awarded points based upon your length of residency, time on the waiting list, marital status, and number of children, income and adequacy of your current accommodation. Unjustified refusal of a tenancy and previous accumulative rent arrears may result in deduction of points awarded. You must let us know of any changes of address and significant change in your circumstances immediately as this may affect your point allocation

The housing providers who are working together to deliver the Southern Region shared list will use the information it obtains from customers for administration in connection with its statutory functions and the provision of any other relevant services to their customers, including marketing, auditing, risk assessment fraud and crime prevention. The information will be shared with all the housing providers

responsible for the shared waiting list. The housing providers may share the information concerning the customer with Government departments and agencies only where there is a statutory requirement to do so, and with agents operating under confidentiality agreements. In addition, The housing providers may have to disclose information about the customer to auditors, legal advisers regulatory bodies and Tynwald members.

Subject to the above and unless it has the right or duty to disclose or is permitted or compelled to do so by law, The housing providers shall not disclose any information about the customer or the company without prior consent of the client or an authorised person. Unless notified by the customer that such information is not required.

The client has a right to see a copy of the records relating to them. The housing providers control and to have any errors corrected. To see a copy of their records the client should apply in writing to the Data Commissioner. The housing provider may charge a fee of up to £10 for such access.

#### **Declaration**

To the best of my knowledge and belief the information provided in this application is correct and complete. I understand that if any information provided is found to be deliberately or carelessly misleading or false it will prejudice the granting and retention of any tenancy. All the information provided to us must be correct. Misleading or falsified information could result in prosecution and jeopardise any future tenancy. I would draw your attention to the following section of the current Housing (Miscellaneous Provisions) Act 1976 which states:

3A. (1) A person commits an offence if, for the purpose of obtaining the provision of housing under this Schedule, whether for that person or another, that person –

- (a) makes a statement or representation knowing it to false; or
- (b) produces or furnishes, or knowingly allows to be produced or furnished, any document or information knowing it to be false in a material particular.
- (2) A person guilty of an offence under subsection (1) shall be liable on summary conviction to a fine not exceeding £5000 or to custody for a term not exceeding 6 months, or both.
- (3) If a person is convicted of an offence under sub-paragraph (1) in connection with housing for himself or herself, the court may, in addition to any other penalty, make an order depriving that person of the estate or interest obtained as a result of the statement or representation or the production or furnishing of the document or information.

I have no objection to the housing providers, to whom this application is made, asking the people or places mentioned on this form for any information which is required to process this application and I consent that the information may be given to the Housing Providers.

Signature of Applicant	
Signature of Joint Applicant	
Date of Application	

# Housing Application Part 3 - Income Tax Authorisation

### Please provide photographic identification for each applicant requiring housing.

Acceptable forms of identification are:
Passport, Current Driving Licence, Current Employment I.D

Application no: <b>HWL</b>	••••
Income Tax Division  2 <sup>nd</sup> Floor Government Office Bucks Road DOUGLAS IM1 3TX	
Housing Waiting List – Inco	ome Tax authorisation
To be completed by the applic	cant(s)
Full name of Applicant	
Date of birth	
Full name of Spouse/Partner	
Date of Birth	
Address	
Tax reference no	
and any Income Tax liabilities	roach the Income Tax Division for verification of my/our income I/we may have. I also hereby authorise you to approach the ation that my / our Income Tax Returns are up to date and the t for Tax purposes.
Date Sign	nature
Sign	nature
	d for Public Sector Housing and I should be grateful if you would provide me espect of the applicants Income Tax status.
Date Sign	ature

Office use only for Income Tax Division: Please return to (housing provider please circle):

Commissioners Office

**Commissioners** 

**Castletown Town** 

Town Hall & Civic Centre

Commissioners

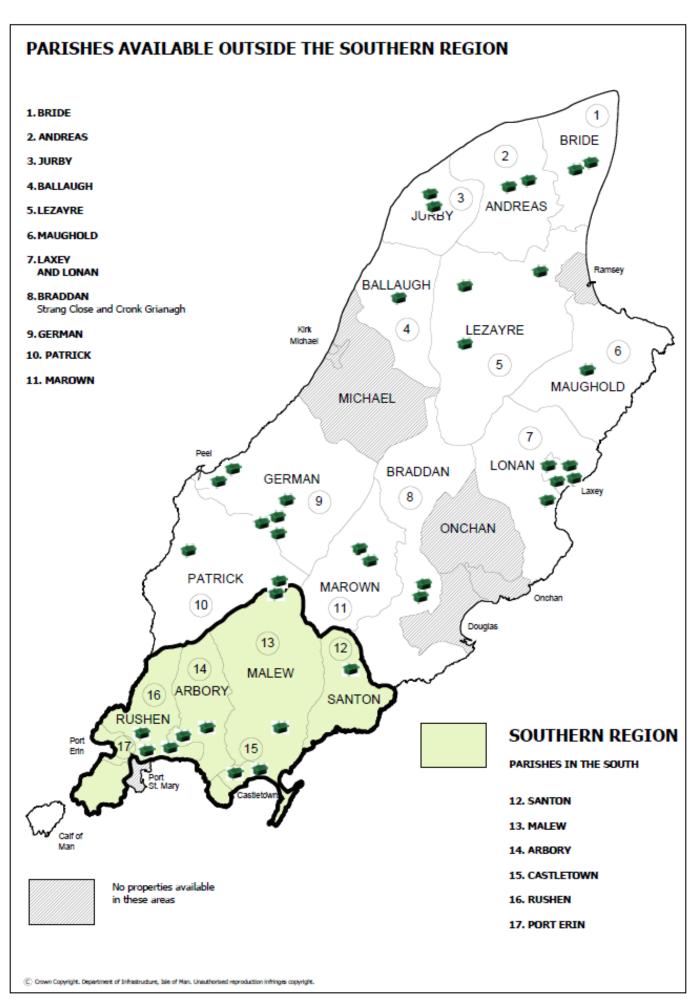
**Port Erin** 

**Department of** 

Infrastructure

Housing Office

Markwell House Market Street, Douglas	Bridson Street Port Erin		Farrants Way Castletown
IM1 2RZ	IM9 6AN		IM9 1NR
Tel: 685955	Tel: 832298		Tel: 825005
e-mail:	e-mail:		e-mail:
housing@gov.im	housing@porterin.	gov.im	housing@castletown.gov.im
TAX REF NO	NAME (s)		
1. OUTSTANDING BALA Income Tax Liability		Amount Ow	ving
1. Assessment no	20/ 20	£	
2. Assessment no	20/ 20	£	
3. Assessment no	20/ 20	£	
4. Assessment no	20/ 20	£	
Class 4 Liability			
1. Assessment no	20/ 20	£	
2. Assessment no	20/ 20	£	
3. Assessment no	20/ 20	£	
4. Assessment no	20/ 20	£	
2. Total Gross Income in yo	ear ended 5 <sup>th</sup> Apri	I 20	
(including where relevant th			ne above year)
£	7 [	£	
Applicant		Spouse	
3. Date first registered res	sidentially for Tax	purposes	
Applicant		Spouse	
4. ANY OTHER RELEVANT I	NFORMATION		
To a constant District Constant		Si	
<b>Income Tax Division</b> Date		signature:	



# Housing Application Part 4 – Checklist

Please check that you have completed all the necessary documentation to support your application by ticking in the boxes below.

Please supply original or certified copies of all documents. Wherever possible these items will be photocopied and returned to you while you wait.

	Have you i	ncluded	Office Use only
1.	Marriage Certificate (Question 2)		
2.	Evidence of divorce or legal separation (Question 2)		
3.	Current utilities bill or bank statement, or similar showing your present address (Question 3)		
4.	Birth Certificates for each person to be housed, including children (Questions 4, 5, 12 & 13)		
5.	Proof of income (min 3 recent payslips inc. benefits) (Questions 10 & 13	3) 🗆	
6.	Proof of savings and investments (Questions 11 & 13)		
7.	Rent book or name & address of landlord (Question 15)		
8.	Details of ownership/co-ownership of any property (Question 16)		
9.	Details of previously owned properties (Question 16)		
10.	Evidence of immediate family living separately (Question 17)		
11.	Supporting form from a health professional (Question 18)		
12.	Notice to Quit or Court Possession Order (Questions 19 & 20)		
13.	Completed Income Tax authorisation form along with relevant signature If joint application both signatures are required. (pages 14& 15)	es.	
14.	Other evidence/supporting information (please list below)		
15.	Photographic I.D. for each applicant		
16.	Full address history, including dates of residence.		
Check	ed By Date:		
Ackno	wledgement Letter sent: Date:		
Specia	al Housing Needs Self-Assessment Form or Support for Rehousing form se	ent please	state:
	. Date:		

	Yes	No	Points Allocated
Area Resident			
Resident IOM			
Born IOM			
Income			
Joint/Single			
Family			
Notice to Quit			
Health/Welfare/ Environment			
Arrears			
Emergency			
Other			
Total Points			
		Арр	rove / Refuse
		Арр	rove / Refuse
Recommendation:  Reason if Refusal:  igned:			rove / Refuse  Date:
Reason if Refusal:			

lditional Information	

Please take or post this form to any of the following addresses:

Department of Infrastructure Housing Office Markwell House Market Street, Douglas IM1 2RZ Tel: 685955 e-mail:

housing@gov.im

Port Erin Commissioners

Commissioners Office Bridson Street Port Erin IM9 6AN Tel: 832298

e-mail:

housing@porterin.gov.im

Castletown Town
Commissioners

Town Hall & Civic Centre Farrants Way Castletown IM9 1NR

Tel: 825005 e-mail:

housing@castletown.gov.im



The Information in this booklet can be provided in large print or audio tape on request