Housing Application Change of Address Form



Please answer all the questions on this form. We may need further information to support your application. Please refer to the checklist at the end of this form for further guidance. Please be aware that if you fail to provide any of the relevant information or provide us with misleading or false information, your application may be disqualified or it may not be awarded the correct priority.

Please email your completed form to houreg@wigan.gov.uk

1: Your Details						
а	Main Applicant			Joint Applicant	(if applicable)	
Title (please tick)	☐ Mr ☐ Mis	s	☐ Ms	☐ Mr ☐ M	iss	☐ Ms
First Names(s)					'	
Surname						
Previous Surname or Alias						
Date of Birth		Age			Age	
Sex	☐ Male	☐ Fema	ale	☐ Male	☐ Fem	ale
National Insurance Number						
Passport Number						
b. Please list below you	ur current address	;				
	Main Applicant			Joint Applicant	(if applicable)	
Address						
Town						
Postcode						

-			o your home addr e to you. This car	-		-	-
Addr	ess						
Towr	1						
Posto	code						
detai			lease remember the details as yo				
		Main Applic	ant		Joint Ap	plicant (if applic	cable)
Dayti numb	me telephone per						
Work numb	telephone per						
Mobi numb	le telephone per						
Emai	l address						
your		o will be mov applicant.	in the property. It is in the property. If Name(s)		g in 2 se		
little	Lastivanio	1 1130	rame(5)	Birth	7.9	to You	moving with you
						SELF	
			_				
			_				

f. Is anybody moving with you pregnant?	Yes No	
Expectant mother's name		
Expected date of birth		
g. If you do not currently live in the Borough, please you are employed in the Borough or wish to give or redetails of your connection to the Borough – location	eceive support from far	nily members. Please provide
2. About Vous Housing Cir		
2: About Your Housing Cir	cumstances	
a) Do you or anyone who will be moving with you a chronic illness or permanent disability?	suffer from	Yes No
Please describe the illness/disability		
Name of person with illness/disability		
b) Does the person use a wheelchair?		Yes No
c) Is your current property adapted? If yes, please give details of the adaptations below		Yes No
d) Are the adaptations still needed? If yes, please explain why below		Yes No
If you have answered yes to this question we will see assess your application on medical grounds.	d you an application fo	r Medical Priority to enable us to
e) Do you require an adapted property? If yes, ple the adaptations you require.	ase list	Yes No

Please be aware that we cannot always guarantee that adaptations can be provided.

f) Are you currently: (please tick one)

Renting from Wigan Council	Living with Parents
Renting from another Council	Lodging with Others
Renting from a Housing Association	Of No Fixed Abode (please provide a correspondence address at Q1c)
Renting from a Private Landlord	Living in Bed & Breakfast/Hotel
An Owner Occupier	In Hospital or Short Term Residential Care *
Living in Supported Accommodation	Living in Prison
In accommodation provided by HM Forces	Living in Hostel without Support
Other (please state in box on the right)	

^{*} If you cannot return to your home when discharged, please explain why at question 5e

g) If you or your partner are living in accommodation provided by the Armed Forces, did you live in the Wigan borough before enlisting?

Yes No

If yes, please provide details of your last permanent address before enlisting in HM Forces. Please provide dates.

Are you a former member of the Armed Forces or a reservist		
with the Armed Forces?	Yes	No
		1
h) Does your family live in two separate properties because there is no suitable accommodation available for you all to be together? If yes, please explain why you have to live apart at question 5e	Yes	No
i) Are you leaving local authority care?	Yes	No
j) Do you own your property or have owned a property in the last 12 months?	Yes	No

How much did you receive home is sold?	or do you expect to receive	ve when your			
If you received or expect evidence of this otherwis			•		
k) Are you likely to lose you (If yes, please explain why			Yes	No	
I) Do you have to leave you	ur home due to domestic v	violence?	Yes	No	
m) Do you have to leave you	•	ilsory Purchase	Yes	No	
n) Are you in accommodat washing, cooking, etc. or is otherwise poor condition?	•		Yes	No	
o) Are you a potential adop and need to move to accor	• •	5 5	Yes	No	
p) What type of property a	•	3 1-2-1-2			
House		Flat			
Bungalow		Caravan			
Bedsit		Sheltered Housing			
Hostel		Hospital			
No Fixed Abode		Other (please state)			
q) How many bedrooms ar	re there, in total , in the pro	operty that you are living	g in?		
r) If you live in a flat, bedsi	t or sheltered accommoda	tion, which floor is it on	?		
Ground Floor	First Floor	Second Floor or Abo	ove		
s) If you live in a flat, does	nce?	Yes	No		
t) Is there a lift in the buildi	ng?		Yes	No	
u) If you live in a bedsit , do to any children?	o you have regular overniç	ght access	Yes	No	

e) pl	e) Is there anything else you think that we should know to help us assess your application? If so please give us details below. It is important that you give as much information as possible.						

Declaration And Authority To Obtain Details From Another Agency

Signing the declaration below means that you agree to the terms and conditions listed in sections 1 and 2.

All information provided by either yourself or a third party will be used for the sole purpose of enabling Wigan Council to assess your application for housing in accordance with the Council's Allocation Policy and the Data Protection Act 2018.

Section 1.

I understand that Wigan Council will decide whether to give me a tenancy based on the information that I have given on this form. The information that I have given is true and correct to the best of my knowledge. I understand that if I give false or misleading information or do not provide relevant information, Wigan Council may exclude me from the Housing Register. This means I will not be allowed a Wigan Council Tenancy.

I understand that Wigan Council, or any partner agency such as a Housing Association, can take back any tenancy they have given me if I have provided false information. I will tell Wigan Council if my circumstances change.

I understand that I may need to provide two satisfactory references as part of this application. I give my permission for Wigan Council to contact any person who has given me a reference to confirm the details given.

Section 2.

I understand that Wigan Council may need to contact other agencies for information about me so they can process my application and assess my suitability to be a tenant and abide by the conditions of tenancy. This could include contacting Housing Benefits and Council Tax, other landlords, the Benefits Agency, Probation Service, the Police and Social Services.

I give permission for Wigan Council to undertake identification verification and/or credit checks with an external company to confirm my identity and help establish that I am able to afford the outgoings to manage a tenancy.

I give permission for Wigan Council to contact any relevant agencies, including my present and/or former landlord. I give these agencies permission to share any information they hold on me with Wigan Council so that they can deal with my housing application and any future tenancy. I understand that even if I do not agree to allow this, some information can still be shared to prevent and detect fraud or if it is to stop me committing crime.

If you are returning the form electronically, do you agree to the points in the declaration above?

Yes

Your Signature	Date	
Joint Applicant Signature	Date	

No

Please note: Your change of address form will not be accepted if you fail to sign this declaration.

Checklist

Please tick to show that you have sent us all the relevant information we need to register your application. FAILURE TO DO SO MAY RESULT IN YOUR APPLICATION BEING CANCELLED.

Question Number		Main Applicant	Joint Applicant	Does not apply
1g	Proof of a local connection if you live outside of the Wigan Borough or have lived in the Borough for less than 5 years			
2j	An estate agents valuation and details of any outstanding mortgage if your equity is below £65,000 or details of the equity you received if the property has been sold or repossessed.			
2m	Evidence of Compulsory Purchase Order or proof that the property is going to be demolished.			
2n	Evidence from Environmental Services confirming that it is not reasonable for you to continue to live in the property long term.			
20	Evidence to show that you have been accepted to adopt a child or as a foster carer or supported lodgings host.			