Devizes Almshouses



Application Form for an Almshouse

Confidential

We need to make sure you are eligible to apply to become an Almshouse resident. Please read the Frequently Asked Questions before competing this form, to check that you believe you are eligible to apply and that Almshouse accommodation would be suitable for you.

PLEASE NOTE: We cannot consider applications that are incomplete. Please ensure that you complete ALL sections.

Please return your completed application to:Clerk to the Trustees, Devizes Almshouse CharitySlade House, St James Gardens, Devizes, SN10 1EL

Section 1 – About You

	First Applicant	Second Applicant
Title (Mr/Mrs/Ms etc.)		
Surname		
Forename(s)		
Date of Birth		
Home Telephone Number		
Mobile Number		
Email Address		
Address including post code		
Are you retired?	YES/NO	
What was/is your occupation?		
Do you have any criminal convictions? If yes, please give dates and details	YES/NO	YES/NO
Do you own a car?	YES/NO	
Do you own any pets? If yes, please give details	YES/NO	

Section 2 – About your home

Please provide name and address of your current landlord	
(We will not contact your Landlord without your consent)	
Is your landlord related to you?	YES/NO
How much is your current rent?	
Please advise the frequency eg. weekly, monthly?	
Why do you wish to leave your present accommodation?	
What type of accommodation do you live in? (eg 3 bed house, flat etc)	
Length of time lived in or around Devizes (including surrounding villages)	
Length of time you have lived at your current address	
If you have lived at your current address for less than 5 years, please advise the previous address and the number of years you lived there	
Have you or your partner ever been refused housing or been evicted by a Private landlord or Housing provider?	YES/NO
If yes, please give dates and details	
Have you or your partner ever owned a property in this country or abroad? If yes, please provide dates and explain the circumstances in which you ceased to be the owner?	YES/NO
Have you transferred ownership of your home to a family member? If yes, when and what were the circumstances?	YES/NO

Section 3 – Your Income

To enable the Trustees to assess your application, please provide the following information. This should include details of all sources of income and state how frequently you receive them, e.g. weekly, monthly or annually.

	First Applicant	Frequency	Second Applicant	Frequency
Wages or Salary from Employment	£		£	
State Pension	£		£	
Work related Pension	£		£	
Any Other Pensions or Income	£		£	
Housing benefit	£		£	
Pension credit	£		£	
Attendance allowance	£		£	
Carer's allowance	£		£	
Disability Living Allowance	£		£	
Do you receive Council Tax support?	YES/NO			
If Yes, how much Council tax do you pay per month?				

Section 4 – Your Money and Borrowing

Please provide details of accounts and balances – if more than one account, please give each balance;

	First Applicant	Second Applicant
Bank accounts	£	£
Building Society / Savings Accounts	£	£
ISA	£	£
Premium bonds	£	£
Shares / Bonds	£	£
Other accounts or assets (please note any assets you may own such as more than 1 car, motorhome or boat etc)	£	£
Do you have any loans or debts outstanding? If yes, please provide details	YES / NO	YES / NO

Section 5 – About your Health and Social Factors

Are you able and willing to live		
independently and to look after		
yourself and your accommodation?		
Please give details of any significant cond Mental Health.	itions or injuries you and/or your partner are living with including	
Please include details of any operations within the last 5 years and any ongoing treatments or medications.		
Do you or your partner have any		
mobility issues? Please give details.		
Are there any other health or social	YES/NO	
factors that you would wish the		
Trustees to take into consideration		
when assessing your application? If yes,		
please give details.		

Section 6 – About your support

Please provide details of who you would call for help in the event of an emergency and would support you in being able to live independently

	Person 1	Person 2
Name		
Relationship to you		
Address including postcode		
Telephone number		

Section 7 – References

Please give the names and addresses of two responsible people (not relatives) who know you well and whom the charity may approach for a reference. Please indicate how you know the referees.

	Referee 1	Referee 2
Name		
Address including post code		
Email address (if known)		
Relationship to you		
How many years have they known you?		

Section 8 – Declaration

I have read the Charity's Frequently Asked Questions and believe that I am eligible to apply to live in one of the Charity's Almshouses. I declare that the information given in this application is correct and complete to the best of my knowledge and belief. I understand that the Trustees would be entitled to terminate any appointment to an almshouse dwelling I may be given as a result of this application, if my answers in this application form are untrue, or misleading in any respect (for example, due to omitting or mis-stating relevant facts).

I accept that if I am appointed as a resident I shall be a beneficiary of the charity and not a tenant. Any weekly sum I pay will be a maintenance contribution and not a rent.

I confirm that I am able to look after myself and to live independently, with the assistance of family and social services if necessary.

I consent to the charity holding personal data on this form in accordance with Data Protection Regulations (see Data Protection Statement below).

I consent to the Charity contacting the named people above to provide references as applicable.

I agree that the charity may contact me by: (Please tick as appropriate.)

🗆 email	🗆 post	□ telephone
Signature(s):	(1)	(2)
Name(s) (PLEASE PRINT NAME(S)	(1)) IN CAPITAL LETTERS)	(2)

Date

Data Protection Statement: It is part of the Trustees' responsibilities to ensure that applicants for almshouses are suitably qualified under the terms of the charity's governing document. Trustees, therefore, need to investigate the personal circumstances of applicants. The personal data supplied on this form and other information relating to an almshouse appointment or your care management will be held on file. Some details may be checked with relevant organisations since the charity reserves the right to investigate and verify what you write in this form, but no details will be disclosed for any inappropriate purpose. You may have access to your personal information on request.

Devizes Almshouse Charity Telephone: 01380 864121