



**Drumchapel  
Housing**  
Co-operative Limited

# Housing Application Form

Applications are welcome from any person 16 years old and over. Please ensure you complete this application fully for us to assess your housing requirements. You can return your completed application to the office at the address below or by email. Please do not hesitate to contact us should you have any questions in relation to the application. We will assess your application and should you qualify for any of our priority tickets, a priority form will be issued to you for completion. You may also be contacted at a later date to provide us with more information regarding your application prior to an offer of housing being made.

Drumchapel Housing Co-operative operates a Choice Based Lettings Allocations Policy. You can find a copy of this on our website.

**If you require this form in a different format, please contact the office on 0141 944 4902.**

Drumchapel Housing Co-operative is a Fully Mutual Society. This means that our properties are collectively owned by its tenant members. In order to become a tenant of Drumchapel Housing Co-operative, you must be accepted as a member therefore it is **essential** you complete the Share Certificate Application form on page 9.



Glasgow and West of Scotland  
Forum of Housing Associations



Drumchapel Housing Co-operative  
4 Kinclaven Avenue  
Drumchapel  
Glasgow  
G15 7SP

 0141 944 4902  
 [enquiries@drumchapelhc.org.uk](mailto:enquiries@drumchapelhc.org.uk)  
 [www.drumchapelhc.org.uk](http://www.drumchapelhc.org.uk)  
 @Drumchapel Housing Co-operative

## Applicant Details

Main Applicant		Joint applicant	
Title		Title	
First Name		First Name	
Middle Name(s)		Middle Name(s)	
Surname		Surname	
Date of Birth		Date of Birth	
National Insurance Number		National Insurance Number	
Is this person pregnant? (If yes please confirm expected due date)		Is this person pregnant? (If yes please confirm expected due date)	

Please confirm the relationship between the main and joint applicant? (e.g. couple, mother and daughter etc)

.....

## Contact Details

Main Applicant		Joint applicant	
Mobile Number		Mobile Number	
Home Number		Home Number	
Email address		Email address	

## Current Address

Main Applicant		Joint applicant (if different)	
Address		Address	
Town/City		Town/City	
Postcode		Postcode	
Date moved in		Date moved in	

## Correspondence Address (if different from above)

Main Applicant		Joint applicant	
Address		Address	
Town/City		Town/City	
Postcode		Postcode	

**Household Details**

Name	Date of Birth	Relationship	Sex	Moving with you Yes/No

	Yes	No
<b>Is there anyone else moving with you who does not currently live with you including access to children?</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please state details below:		

Name	Date of Birth	Relationship	Sex	Access only Yes/No

**Current living circumstances  
(please tick relevant box)**

Housing Association/Housing Co-operative tenant	
Council tenant	
Private tenant	
Owner occupier	
Temporary homeless accommodation	
Living with relatives	
Living with friends	
Lodger	
Other (please confirm)	

**Type of accommodation  
(please tick relevant box)**

Bedsit/Studio flat	
Tenement flat	
Multi-storey flat	
Maisonette	
Four in a block (lower flat)	
Four in a block (upper flat)	
Terraced home	
Semi-detached home	
Detached home	
Other (please confirm)	

**Number of bedrooms:**

Double	
Single	

**Landlord details:**

Name: .....

Address: .....

.....

.....

Telephone number: .....

Email address: .....

**Reason for leaving:** .....

.....

.....

	Yes	No
<b>Are you homeless or threatened with homelessness?</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>If Yes, have you presented as homeless to the local authority?</b>	<input type="checkbox"/>	<input type="checkbox"/>
<p>If no, you can continue to complete this application however please contact the North West Homeless Casework Team 0141 276 6168 if you reside in the North West of Glasgow. If you reside in any other area, please contact your local authority Homeless Casework Team.</p>		

**Condition of property  
(please tick any that apply)**

No fixed bath/shower	
No running water	
Inadequate hot water supply	
No central heating	
No double glazing	
Extensive dampness/water penetration	
Structural problems	
Rodent or insect infestation	
Closing Order served	

**Insecure accommodation  
(please tick any that apply)**

Under a Notice to Quit	
Mortgage repossession pending	
Tied accommodation	
Tenant in a hostel	

**Please list all addresses in the past 5 years:**

**Previous Address 1**

Main Applicant		Joint applicant	
Address		Address	
Town/City		Town/City	
Postcode		Postcode	
Reason for leaving		Reason for leaving	
Date moved in		Date moved in	
Date moved out		Date moved out	
Name of Landlord		Name of Landlord	

### Previous Address 2

<b>Main Applicant</b>		<b>Joint applicant</b>	
Address		Address	
Town/City		Town/City	
Postcode		Postcode	
Reason for leaving		Reason for leaving	
Date moved in		Date moved in	
Date moved out		Date moved out	
Name of Landlord		Name of Landlord	

### Previous Address 3

<b>Main Applicant</b>		<b>Joint applicant</b>	
Address		Address	
Town/City		Town/City	
Postcode		Postcode	
Reason for leaving		Reason for leaving	
Date moved in		Date moved in	
Date moved out		Date moved out	
Name of Landlord		Name of Landlord	

	Yes	No		
<p><b>Has anyone ever taken action against you, the joint applicant or anyone who will be living with you for anti-social behaviour?</b></p> <p>If yes, please give details below:</p>	<input type="checkbox"/>	<input type="checkbox"/>		
<p><b>Do you or the joint application have any current or former rent arrears, mortgage arrears or rechargeable repairs arrears?</b></p>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Please confirm type(s) of arrears outstanding and for what address(es)?</p>				
<p>Please confirm the balance(s) outstanding?</p>				
<p><b>Please confirm if you have maintained a payment arrangement(s) for 13 weeks/3months?</b></p> <p>If yes, please provide evidence of this from your current or previous landlord</p> <p>If no, please confirm reason(s) below:</p>			<input type="checkbox"/>	<input type="checkbox"/>

**Reason for Housing (please tick any that apply)**

Assessed as unintentionally homeless by the local authority		Notice to Quit	
Overcrowding (property too small)		Mortgage repossession	
Medical needs (current accommodation cannot be adapted to meet your medical needs)		Tied accommodation	
Medical needs (other)		Leaving HM Forces	
Below Tolerable Standard		Relationship breakdown (separating partners)	
Under-occupied (property too big)		Shared amenities	
Demolition or regeneration		No fixed address	
Leaving care		Require care and support	
Leaving hospital/supported accommodation		Job reasons	
Domestic abuse		Living in multi-storey accommodation	
Harassment		Other (please state):	

**What size of property would you consider? (please state number of bedrooms)**

**What type of property would you consider?**

Tenement flat (ground floor)		Four in a block (upper)	
Tenement flat (first floor)		Bungalow (no internal stairs)	
Tenement flat (any floor)		Terraced house	
Four in a block (lower)		Semi-detached house	

	Yes	No
<b>Do you have any pets?</b>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please state type(s) below:		

**Economic Status (please tick relevant box)**

Main Applicant		Joint applicant	
Working full time (35+ hours per week)		Working full time (35+ hours per week)	
Working part time (less than 35 hours per week)		Working part time (less than 35 hours per week)	
Unemployed		Unemployed	
At home (not seeking work)		At home (not seeking work)	
Retired		Retired	
Student		Student	
Disability		Disability	
Other (please state)		Other (please state)	

**Please confirm if you, the joint applicant or any household members suffer from any disabilities that affect your housing need?**

Yes       No

If yes, please provide details: .....

.....

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.....

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**Please confirm if you are moving to provide support or receive support from a friend or relative?**

Yes       No

If yes, please provide details including support needs: .....

.....

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.....

.....

**Please provide any other relevant information to support your application including any amenities you require:**

(Please note that you will only be considered for properties containing the amenities you have stated)

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**As far as you know, are you related to a current or past (last 12 months) member of the Management Board or any staff member of the Co-operative?**

Yes       No

If yes, please give details: .....

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.....

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**Sex Offenders Act 2003**

**Are you or anyone moving with you, required to register with the Police under the Sex Offenders Register?**

Yes       No

If yes, please supply the full name(s) of the person(s): .....

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## Declaration

- Where health or disability information is provided, I consent to this information being used for the purposes of my application.  
 Please tick to consent
- I declare that all the information I have provided on this application form is true and accurate. I will notify you of any changes in circumstances as soon as possible. I have checked that the information provided has been completed correctly and have read over the data entered before submitting.
- I understand that any false or misleading information or the withholding of information, that is material to my housing application now and at any time, may result in my application being cancelled, any offers of a tenancy being withdrawn, and may result in Drumchapel Housing Co-operative seeking repossession of any tenancy granted.
- I give Drumchapel Housing Co-operative permission under the Data Protection Act 2018 to obtain information from necessary sources to process my application for housing. This includes my current landlord and any previous landlords.
- I understand that Drumchapel Housing Co-operative will process the information within this form for the purposes of my housing application and in compliance with relevant data protection legislation (UK GDPR and DPA 2018). Further information on this processing and your rights in respect to the processing of your personal data can be found in our **Fair Processing Notice** on our website.

Main Applicant		Joint applicant	
Name		Name	
Signature		Signature	
Date		Date	

If completing this form online, please note that your full name typed in the above box constitutes a signature and will be treated as such.





## Share Certificate Application Form

### VOTING MEMBER

Name:	
Current Address:	
Future Address (office use only)	

**I hereby apply to become a member of Drumchapel Housing Co-operative Limited:**

Signed: .....

Date: .....

### JOINT MEMBER

Name:	
Current Address:	
Future Address (office use only)	

**I hereby apply to become a joint member of Drumchapel Housing Co-operative Limited:**

Signed: .....

Date: .....

### NOTES

Drumchapel Housing Co-operative Limited is a Fully Mutual Co-operative. Members will not have the right to purchase the property under the Tenants Rights (Scotland) Act 1980 and the Housing (Scotland) Act 1986.

**Our Board approve all membership applications, your name is shared with Board during the application process.**

Where a joint application is made, only the member whose name stands first in the register of members of the Co-operative shall be entitled to exercise the rights of membership. If a member of the Co-operative ends their tenancy, the £1.00 share capital is forfeited.

**Please complete this Share Certificate Application Form and return with your Housing Application Form. YOU DO NOT NEED TO PAY FOR THE PURCHASE OF YOUR SHARE AT THIS TIME.**

FOR OFFICE USE ONLY	DATE	SIGNED
Membership Application (effective from)		
Membership Application Approval		
£1 Share Capital Paid		
Transfers/Terminations		
£1 Share Transfer		
Forfeited		
Exemptions		
Reason		

## Areas covered by Drumchapel Housing Co-operative

Street	Numbers
Carolside Drive	29 – 63 (Odds)
Ledmore Drive	1 – 5 (Odds)
Kinclaven Avenue	All
Kinclaven Gardens	All
Kinclaven Place	All
Linkwood Drive	83 – 131 (Odds)
Linkwood Drive	110 – 118 (Evens)

Street	Numbers
Linkwood Gardens	All
Linkwood Grove	All
Merryton Avenue	All
Merryton Gardens	All
Southdeen Avenue	52A – 98 (Evens)
Southdeen Grove	All
Southdeen Road	All
Tallant Road	101 – 113 (Odds)

