

Homesearch Register - Change of Address Form

Surname/s:

First name/s:

Old Address:

Postcode:

Application Number Contact telephone no

Your National insurance No. Your partners NI No.

New address:

Postcode:

Date you moved:

Phone number where we can contact you (*essential*)

Correspondence Address (if different to new address)

Postcode:

Is this property a: House? Flat?
Studio/bedsit? Bungalow? Caravan?

Other (*please describe below*)

If the property is a flat is it, ground floor? 2nd floor?
(*please tick*) 1st floor?
3rd floor or above? please tell us which floor

Is this home part of a sheltered scheme for older people? (Y/N)

If you are aged 60 or over do you want sheltered housing? (Y/N)

Can you and your family manage stairs? (Y/N)

Are there any medical reasons for wanting to move? (Y/N) } Please give
 Does your partner live at a different address? (Y/N) } details on a
 Are there any problems with the condition of your home? (Y/N) } separate sheet

How many people live in your home? Adults Children (17 and under)

How many bedrooms are in your home?

How many bedrooms do you and the people who are to be housed with you have sole use of?

Are you? *Please tick the relevant box*

Renting from a housing association?	<input type="checkbox"/>	In bed & breakfast or a hostel?	<input type="checkbox"/>
Renting from a non-resident private landlord?	<input type="checkbox"/>	In a home provided by your employer?	<input type="checkbox"/>
Renting from a resident private landlord?	<input type="checkbox"/>	Living with friends	<input type="checkbox"/>
Renting from a Local Authority?	<input type="checkbox"/>	In the Armed forces	<input type="checkbox"/>
An owner occupier?	<input type="checkbox"/>	Living with parents or relative?	<input type="checkbox"/>
In Prison?	<input type="checkbox"/>	In a residential care home?	<input type="checkbox"/>
In a children's home or foster placement?	<input type="checkbox"/>	Roofless/street Homeless/NFA?	<input type="checkbox"/>

Name and address of your Landlord:

*Please send us a **copy** of your tenancy agreement.*

Signed
 Signed

Date
 Date

If it is a joint application both should sign.

Please make sure the form is fully completed and return it to:

Homeseach Team,
 Adult Social Services & Housing,
 PO Box 3343,
 Bath BA1 2ZH

Phone (01225) 396118
 Facsimile (01225) 396248
 Minicom (01225) 477815

Information about our policy and how to bid for a property can be found on our website

www.homeseachbathnes.org.uk

This information can be made available in a range of languages, large print, Braille, on tape, electronic and accessible formats. Please contact the Homeseekers Team on 01225 396118 or Minicom 01225 477815 or email us at Homeseach@bathnes.gov.uk