

The Charity of Mrs Mabel Luke

Charity Commission Reg. No. 236518

Registered Provider No. 4840



Registered Office:

C/o UHY Ross Brooke

2 Old Bath Road

Newbury

Berkshire RG14 1QL

Clerk: 07555 779 207

Email: contact@mabelluke.co.uk

Website: www.mabelluke.co.uk

Application for an almshouse flat at Mabel Luke Place, Mill Lane, Newbury

The Charity of Mrs Mabel Luke provides one and two-bedroom flats for people in housing need who are resident in, or have a connection to, Newbury and/or the parish of Greenham.

This application form is for people who are applying directly to the Charity rather than being nominated by West Berkshire Council through the Council's Homechoice scheme. The Charity allocates flats to people who meet the Charity's eligibility criteria but who are not necessarily on West Berkshire Council's Housing Register.

Applicants should read the Charity's Allocations Policy before completing this form to check that they are eligible. The policy is on the website or available from the Clerk.

If you need help to complete the form, contact the Clerk on 07555 779207.

1. Household members (adults)

	Applicant 1	Applicant 2
Title		
First name(s)		
Last name		
Previous surname (e.g. maiden name)		
Gender		
Date of birth		
Nationality		
First language		
Second language		

Relationship to Applicant 1		
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2. Details – adults

	Applicant 1	Applicant 2
Connection with Newbury and/or Greenham parish		
Are you on West Berkshire Council's Housing Register?		
National Insurance number*		
Current address		
Date you moved in		
Reason for wanting to move out		
Mobile phone no.		
Email address		

3. Previous address

	Applicant 1	Applicant 2
Previous address		
Date moved in		
Date moved out		
Reason for leaving		

4. Previous licences/tenancies

Does anyone on your application form owe rent or other charges to a previous landlord? (If yes, please state amount owed)	
Has anyone on your application form ever been given a Notice to Quit or Possession order? (If yes, give brief details)	

Has anyone on your application form ever lived in an almshouse before?	
Has anyone on your application form ever been a council or housing association resident before?	

5. Where you live now

	Applicant 1	Applicant 2 (if different)
Type of accommodation (Please circle the right one)	Bedsit / Flat / House / Bungalow Other (e.g. room in parent's house). Give details:	Bedsit / Flat / House / Bungalow Other (e.g. room in parent's house). Give details:
Level, if not a house (Please circle)	Ground floor / first floor second floor	Ground floor / first floor second floor
Number of bedrooms		
Do you have access to a garden?		
Tenure (Please circle)	Private rented / social rented / owner occupier / part owner / other	Private rented / social rented / owner occupier / part owner / other
Current rent (if applicable)		
Name and contact details of current landlord (if applicable)		
Are you currently in arrears of rent or other charges? (If yes, give details)		

6. Other household members

If other people will live with you in the almshouse, give their details here.

Note: If you are expecting a child/children please give due date(s).

Name	Gender	Date of birth	Relationship to you	Nationality

7. Health and support needs

Does any member of your household consider themselves to be disabled or to have a long-term health condition? If Yes give details	
Does any member of your household have difficulty with stairs? Note: there are no lifts in our properties	
Does any member of your household have support needs? If Yes, give details and state what support arrangements are in place. Note: the Charity cannot provide support.	

8. Employment details

	Applicant 1	Applicant 2
Are you currently working? (Please circle)	Yes, full time / Yes, part-time / Not working	Yes, full time / Yes, part-time / Not working
Job title if you are working		
Employer's name and address		
Date started working there		
Is this a permanent job?	Yes / No	Yes / No
How many hours a week do you usually work?		
What is your monthly take home pay after tax?	£	£
Are you paid weekly or monthly?		

9. Benefit details

Applicant 1			
Do you currently claim any benefits?		If	Yes / No
Yes, please tell us more below			
Benefit income	Amount	Paid when? (circle right one)	Paid directly to you?
Housing benefit	£	weekly/fortnightly/monthly	Yes / No
Universal Credit	£	weekly/fortnightly/monthly	Yes / No
Other benefit income total	£	weekly/fortnightly/monthly	Yes / No
Applicant 2			
Do you currently claim any benefits?		If	Yes / No
Yes, please tell us more below			
Benefit income	Amount	Paid when? (circle right one)	Paid directly to you?
Housing benefit	£	weekly/fortnightly/monthly	Yes / No
Universal Credit	£	weekly/fortnightly/monthly	Yes / No
Other benefit income total	£	weekly/fortnightly/monthly	Yes / No

10. Other income

Applicant 1			
Do you have any other income (e.g. pension)? If Yes , please tell us more below		Yes / No	
Type of income	Amount	Paid when? (circle right one)	Paid directly to you?
	£	weekly/fortnightly/monthly	Yes / No
	£	weekly/fortnightly/mthly	Yes / No
	£	weekly/fortnightly/monthly	Yes / No
Applicant 2			
Do you have any other income (e.g. pension)? If Yes , please tell us more below		Yes / No	
Type of income	Amount	Paid when? (circle right one)	Paid directly to you?
	£	weekly/fortnightly/monthly	Yes / No
	£	weekly/fortnightly/monthly	Yes / No
	£	weekly/fortnightly/monthly	Yes / No

11. Savings, capital and debts

	Applicant 1	Applicant 2
Do you have any savings? If Yes , please tell us how much	Yes / No £	Yes / No £
Do you have any investments? If Yes , please tell us how much	Yes / No £	Yes / No £
Do you own any land or property? If Yes , give details including current value	Yes / No	Yes / No
Do you have any debts? If Yes , tell us how much you owe	Yes / No £	Yes / No £

12. Any other information

If there is any other relevant information that will support your application to the Charity of Mrs Mabel Luke, please give it here.

13. References

Please give the names and addresses of two responsible people (not relatives) such as an employer or a religious leader who know you well, whom the Charity may approach for a reference. You should ask for their agreement to provide a reference before naming them.

Reference 1: name	Reference 2: name
Postal address	Postal address
Telephone no.	Telephone no.
Email address	Email address
How they know you	How they know you

14. Declaration

14.1 I have read the Charity's Allocations Policy and believe that I am eligible to apply to live in one of the Charity's almshouses.

14.2 I understand that if I am allocated a property, I shall be a beneficiary of the Charity occupying the flat under licence and not a tenant. Any weekly sum I pay will be a maintenance contribution and not a rent.

14.3 I understand that smoking is not permitted anywhere on the Charity's property, either inside or outside the flats, and that this applies to residents and visitors.

14.4 I understand that pets are not permitted on the Charity's property under any circumstances. I undertake to make suitable arrangements to rehome any pets currently owned by me or members of my household before moving into the flat.

14.5 I have read and understand the conditions set out above and I declare that the information given in this application is correct and complete to the best of my knowledge and belief.

15. Use of your personal information

We ask applicants about their personal circumstances so we can make sure they are eligible to live in one of the Charity's flats. The information you provide on this form and any other information you give us relating to your application will be kept on file and treated as confidential.

We will not share any of your personal information with a third party unless we need to confirm something relevant to your application. **Please tick this box to give us your permission to share information for this purpose:**

Now sign below and return your application by email to: contact@mabelluke.co.uk
Or by post to: The Charity of Mrs Mabel Luke, c/o UHY Ross Brooke, 2 Old Bath Road, Newbury, Berkshire RG14 1QL

Applicant 1	Applicant 2
Signature:	Signature:
Name: (print in capital letters)	Name: (print in capital letters)
Date:	Date:

Equal opportunities monitoring

Completing this section is optional but if you do, it will help us to make sure we are giving people of all backgrounds fair access to our housing.

From time to time we might be asked to share our equal opportunities monitoring data with other bodies, such as the Regulator of Social Housing, for research purposes. In that case all names and addresses are removed and it is not possible to identify any individual.

Ethnic origin (tick one)		Applicant 1	Applicant 2
White			
	White British		
	White Irish		
	White Other		
Mixed			
	White and Black Caribbean		
	White and Black African		
	White and Asian		
	Other mixed		
Asian or Asian British			
	Indian		
	Pakistani		
	Bangladeshi		
	Other		
Black and Black British			
	Caribbean		
	African		
	Other		
Chinese or other ethnic group			
	Chinese		
	Other		
Gypsy/Traveller			
	Romany		
	Welsh		
	English		
	Irish		
	Scottish		
	Gypsy		
	Traveller		
	New Age		
Don't wish to say			
Religion (tick one)		Applicant 1	Applicant 2
	Buddhist		
	Christian		
	Hindu		
	Muslim		
	Jewish		
	Sikh		
	Other		
	None		
Don't wish to say			
Sexual orientation		Applicant 1	Applicant 2
	Heterosexual		
	Bisexual		
	Homosexual		
Don't wish to say			

Rehabilitation of Offenders Act 1974	Applicant 1	Applicant 2
Have you ever been convicted of a criminal offence?	No / Yes	No / Yes
If Yes , please give date of conviction(s) and details of offence(s) and sentence(s)		

* We are required by law to request your National Insurance number to prove that you are legally resident in the UK.