



# The Skinners' Almshouse Charity

## APPLICATION FOR RESIDENCE



### SKINNERS COURT

1 Pellipar Close | Fox Lane | Palmers Green | Enfield N13 4AE

How did you find out about Skinners Court? .....

PLEASE TICK BOXES THAT APPLY Individual application  Joint application

If this is a joint application please also fill in the relevant '2<sup>nd</sup> applicant' grey boxes below

1. Personal details

Mr  Mrs  Miss  Ms

First name  Last name

First name - 2<sup>nd</sup> applicant  Last name - 2<sup>nd</sup> applicant

Relationship to first applicant .....

Address  Telephone

Mobile

NI number

Date of Birth

Email  DoB - 2<sup>nd</sup> applicant

Permanent residency in the UK? Yes  No

Permanent residency in the UK? - 2<sup>nd</sup> applicant Yes  No

If either is no, please clarify .....

Married  Widowed  Single  Divorced  Separated  Cohabiting

2. Reason for application

Hard to maintain your home  Want to live in a smaller home

Racial or other harassment  Ill health

About to be made homeless  Want to live in a community

To move closer to relatives/friends/cultural centre or for other reason  Please give details:

.....

3. Where you live now

Owner/occupier  Lodging

Council tenant  Staying with friends/relatives

Housing Association tenant  In hospital

Tenant of a private landlord  In sheltered housing

Other (please explain)

.....

How many years have you lived there?  Do you want to bring any pets with you? Yes  No

If yes, please specify .....

HOUSING REFERENCE: We require proof of where you have been living for the last 5 years. If you are/have a tenant, may we contact your landlord for a housing reference? YES  NO

Landlord 1 phone & move-in date: \_\_\_\_\_

Landlord 1 email address: \_\_\_\_\_

Landlord 2 phone & move-in date: \_\_\_\_\_

Landlord 2 email address: \_\_\_\_\_

**4. Health and mobility**

Please tick if you (and anyone moving with you):

a. Have a serious long term illness or disability

Yes  No  If Yes, please give details.....

b. Have aids/adaptations in your current home

Yes  No  If Yes, please give details.....

c. Use mobility aids e.g. walking stick, walking frame, wheelchair

Yes  No  If Yes, please give details.....

d. Have help with housework or making meals

Yes  No  If Yes, please give details.....

e. Have help with personal care/hygiene/bathing

Yes  No  If Yes, please give details.....

**5. Financial information**

Please give total for yourself and anyone moving with you:

Weekly income from all sources after tax and other deductions

Total capital including savings, investments etc

If owner/occupier please state:

Value of property  Outstanding mortgage

If not owner/occupier please state Landlord's details: Name .....

Address .....

Phone number .....

Any rent arrears?

£

Are you in receipt of Housing Benefit?

Yes

No

### 6. Alternative housing

Are you on any other waiting lists for housing?

Yes

No

If Yes, please give details:

### 7. Access

Access to the first and second floors is by lift. Are you comfortable using a lift?

Yes

No

### 8. Declaration

I understand that by signing this form I agree that the information provided is accurate and true.

I agree that if appointed I will occupy my flat as a beneficiary of the Skinners' Almshouse Charity. I understand that giving false or inaccurate information could result in the termination of the licence to occupy.

The personal data given on this form and other information relating to any almshouse appointment/support will be held on file. Some details may be checked with relevant agencies, but none will be disclosed for any inappropriate purposes. You may have access to your personal information on request.

Under the Data Protection Act we must obtain your consent to process and retain information you have given.

I give consent to the processing of the personal data supplied by me.

Applicant's signature .....

Date .....

*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. If your application for accommodation is successful, the personal data supplied on this form and other information relating to an almshouse appointment will be held on file for the duration of your appointment as a resident and for up to three further years. Some details may be checked with relevant organisations, but none will be disclosed for any inappropriate purpose. You may have access to your personal information on request. If your application is unsuccessful, your application form and all other personal data supplied will be destroyed.*

9. Please return completed Application Form *and* Monitoring Form to

Almshouse Administrator  
The Skinners' Almshouse Charity, Skinners' Hall, 8 Dowgate Hill  
London  
EC4R 2SP  
Tel: 020 7213 0576  
Email: almshousecharity@skinners.org.uk

Registered Office  
**Skinners' Hall, 8 Dowgate Hill, London EC4R 2SP**

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Registered Charity No. 1127772; Housing Corporation No. A2948.  
Subsidiary charities: The Percy Bilton Fund Charity (1127772-1), Skinners' Almshouse Foundation (1127772-2)