## Exelby Green Dragon Community Pub Ltd

## Affordable Housing Application Form

This form is designed to give the allocation panel information about you and your family that will enable them to decide on your application based on the criteria attached to this form. If this is a joint application, please provide information for both applicants. If you need to add more information, please add an additional sheet.

Name of the applicant(s)		
Current address		
Phone number(s)		
E mail addresses		
Date of birth of first applicant		
Date of birth of second applicant		
Are you currently a resident of Exelby or neighbouring villages? If so, how long have you lived in the area?	Yes/No	For How long?
Were you previously a resident of Exelby or neighbouring villages? If so between what dates?	Yes/No	Between when?
Do you have close family members living in Exelby or neighbouring villages? If so, what relation are they to you?	Yes/No	Relations
Do you work in the area? If so as what?	Yes/No	Work
Do you have a health- related reason for wanting to move to or remain in the area? If so, please explain what it is.	Yes/No	Health related reasons

Is your current home physically unsuitable for you? If so, please explain why.	Yes/No	Physical unsuitability of current home
Are you homeless or likely to become homeless? If so, please explain the circumstances.	Yes/No	Explanation of circumstances
Is your current accommodation too small for you and your family? If so, please explain your accommodation needs.	Yes/No	Accommodation needs
Are you suffering from any kind of hardship that will be assisted by staying in or moving to the area? If so, please explain it.	Yes/No	Special hardships
Will your quality of life will be significantly improved by moving to or remaining in the area because of support from or to family and friends? If so, please explain how.	Yes/No	Quality of life improvements
Do your financial circumstances prevent you from buying or renting another property in the area? Please provide some details.	Yes/No	Financial circumstances
Please add any further information that you feel is relevant to your application.		
Signature of applicant(s)		
Date of application		