

Application for Almshouse Housing

Guidance Notes

WYGGESTONS & TRINITY
ALMSHOUSES

Please read these notes carefully before completing the Application Form

Each completed application is assessed against the eligibility criteria detailed below; after which, you will be notified in writing of our decision. We would kindly ask you to note that all eligibility criteria must be met in order to qualify for housing with us and submitting an application does not guarantee you will be accepted onto our Waiting List.

You will also be required to provide relevant additional information in support of your application, which is used to confirm your eligibility, plus determine any additional priority status for rehousing. It is important that you complete the form fully and provide us with all relevant information in order to avoid your application being delayed.

A. Eligibility Criteria

To be eligible for housing at the Wyggestons and Trinity Almshouses, applicants **must**:

- Be over the age of 60.
- Be in need of housing.
- Be living within Leicestershire or have a strong connection with the county (e.g. a close family member living here).
- Not have over £250,000 in assets (this is reviewed annually).

Should an application not meet all of the above criteria; the Application Form will not be processed and the applicant(s) will be notified in writing.

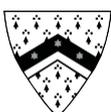
B. General Information

Please:

- Read the questions carefully and fill in every section of the form as fully as you can. If you think some parts do not apply, write N/A (not applicable) in the spaces provided.
- Make sure any information you provide is clear and precise, as this will be used to determine your priority level, which in turn could impact how long you will wait before receiving an offer of accommodation.
- Complete the Proof Document Checklist and send copies of any required documentation along with the Application Form.

Completed applications should be returned to:

The Admin Team | Wyggestons | Lancaster House | 160 Hinckley Road | Leicester | LE3 0UX



Wyggestons

- ☎ 0116 255 9174
- ✉ enquiries@wyggestons.org.uk
- 🌐 www.wyggestons.org.uk
- 📍 160 Hinckley Road | Leicester | LE3 0UX



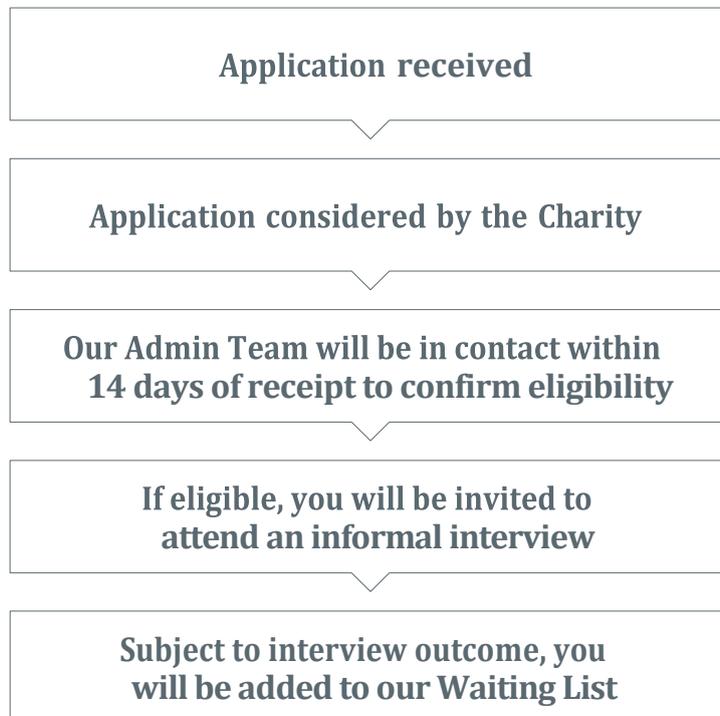
Trinity Hospital

- ☎ 0116 255 4829
- ✉ office@trinityleicester.org.uk
- 🌐 www.trinityleicester.org.uk
- 📍 50 Western Boulevard | Leicester | LE2 7BU

Data Protection Statement

It is part of the Trustees' responsibility to ensure that applicants for almshouses are suitably qualified under the terms of the Charity's governing document. The personal data supplied on this form and other information relating to an almshouse appointment or your care management will be held on file. As the Charity reserves the right to investigate and verify the contents of applications, some details may be checked with relevant organisations, but all personal information will be handled sensitively and in accordance with current data protection regulations. You may have access to your personal information on request.

D. What happens next?



As you will appreciate, we receive a large number of applications for only a limited number of properties and regrettably this means that there can be disappointment if applicants are not accepted onto our waiting list. It is important that we inform potential applicants that when properties become available, these are allocated based on need. If your housing situation is pressing, we would recommend you also contact other local almshouses and Housing Associations.

Proof Document Checklist

Please send us **all** of the below listed documents that apply to you. Please note that some documentation may cover more than one area; in which instance, please provide one copy only, per person. Where a request is not relevant, please write in N/A, otherwise tick the box where documents are enclosed. Failure to provide all documentation will prevent us from processing your application.

Right to Rent

Any applicant must have UK citizenship or indefinite/exceptional leave to remain in the UK with access to public funds. Please provide a copy of your passport or UK birth certificate.

National Insurance Number

Please provide a recent payslip, NI card, DWP/benefit/state pension letter, or any other official document that shows a NI number.

Proof of Address

Please provide proof of all addresses you have lived at, covering the last five years. This can be a bank statement, utility bill or any other official document with a name, address and date on it.

Proof of Savings/Financial Circumstances

Please provide copies of bank/savings account statements for all accounts held, dated within the last two months; and/or property valuation(s), sales brochure(s) and mortgage statement as appropriate.

Proof of Income

Please provide evidence of earnings (such as payslips or proof of earnings), pension or benefits, dated within the last two months.

Almshouse Accommodation Application Form

Section 1: About You

First Applicant	Full Name (inc. Title):	Date of Birth:	NI No.
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Second Applicant	Full Name (inc. Title):	Date of Birth:	NI No.
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Contact Details	Email Address(es):	Phone Number(s):
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Current Address		
	Postcode:	How long have you lived at this address?

If you have lived at your current address for less than 5 years, please provide previous addresses below:

Address	Date from	Date to	Name and address of landlord (if rented)

Next of Kin Details
<p>Person 1</p> <p>Name: _____ Relationship: _____</p> <p>Address: _____</p> <p>_____</p> <p>Phone Numbers: _____</p> <p>Email Address: _____</p> <p>Are they able to assist in cases of illness or emergency? <input type="radio"/> Yes <input type="radio"/> No</p>

Almshouse Accommodation Application Form

Section 2; Where you live now

Property Details	Please give a brief description of the property you live in (e.g., number of bedrooms / bathrooms, condition, etc.):	
Current Residence	Do you live in a non-domestic setting e.g Residential Home, Hostel, Hospital, etc.? <input type="radio"/> Yes <input type="radio"/> No	
	If you have answered Yes to the above, please give details:	
Renting	How long have you been a tenant at the property?	
Landlord Please note your landlord must be one of the referees provided in section 14.	Full Name:	
	Address:	
	Phone Number:	
Details	What is your current rent? £	<input type="radio"/> Weekly <input type="radio"/> Monthly <input type="radio"/> Yearly
	How much notice do you have to give?	

Almshouse Accommodation Application Form

Section 2; Where you live now (continued)

Home Owner	What is the estimated sale value? £			
	Do you have an outstanding mortgage/secure loan(s)?			
	<input type="radio"/> Yes <input type="radio"/> No		If yes, what is the outstanding value? £	
	Have you taken out equity release? £			
Current use Do you currently have exclusive use of the following?	Living Room:	Bedroom:	Kitchen:	Bathroom:
	<input type="radio"/> Yes <input type="radio"/> No			
If you have answered No to any of the above, please give details of how many people you share with:				
Housing Condition Does your present residence have the following?	Bath or Shower:		Please provide details where appropriate:	
	<input type="radio"/> Yes <input type="radio"/> No			
	Stairs:			
	<input type="radio"/> Yes <input type="radio"/> No			
	Adequate Kitchen Facilities:			
<input type="radio"/> Yes <input type="radio"/> No				
Dampness or Condensation:				
<input type="radio"/> Yes <input type="radio"/> No				
Any Serious Repairs Problems:				
<input type="radio"/> Yes <input type="radio"/> No				
Adaptations	Does your accommodation have special adaptations?			
	<input type="radio"/> Yes <input type="radio"/> No			
If you have answered Yes to the above, please give details:				

Almshouse Accommodation Application Form

Important Information

- ❗ When completing this section we would encourage you to tick as many accommodations as possible, in order to give you the best chance of being appointed to an almshouse property.
- ❗ We would ask you to note that appointments to properties are based on level of need, as opposed to time spent on the Waiting List and we therefore recommend that applicants consider all housing options available to them.
- ❗ Please note that single applicants will not be considered for 2 Bed properties, in line with our Allocations Policy.

Section 3; Where you want to move to

William House Wyggestons	<input type="radio"/> 1 Bed Flat	<input type="radio"/> 2 Bed Flat	Please tick all options you would consider.
Lancaster House Wyggestons	<input type="radio"/> 1 Bed Flat	<input type="radio"/> 2 Bed Flat	
The Cottages Wyggestons	<input type="radio"/> 2 Bed Bungalow		
Trinity Hospital	<input type="radio"/> 1 Bed Flat	<input type="radio"/> 2 Bed Flat	
Location and Access	<input type="radio"/> Ground Floor	<input type="radio"/> First Floor	<input type="radio"/> Second Floor
	Our William House, Lancaster House and Trinity Hospital locations are comprised of ground and upper floor accommodation. Please indicate your preference as to location, but please note we cannot guarantee availability.		

Almshouse Accommodation Application Form

Section 4; Your needs and support requirements

		First Applicant	Second Applicant
Wheelchairs Do you have and use a wheelchair?	Yes, all the time	<input type="radio"/>	<input type="radio"/>
	Only indoors	<input type="radio"/>	<input type="radio"/>
	Only outdoors	<input type="radio"/>	<input type="radio"/>
	No, never	<input type="radio"/>	<input type="radio"/>
Mobility Do you have any of the following mobility problems?	Walking	<input type="radio"/>	<input type="radio"/>
	Standing	<input type="radio"/>	<input type="radio"/>
	Climbing a step	<input type="radio"/>	<input type="radio"/>
	Climbing stairs	<input type="radio"/>	<input type="radio"/>
Daily Living Do you need any advice, help or support with daily living tasks (e.g. cooking, cleaning, washing, dressing)?	Yes	<input type="radio"/>	<input type="radio"/>
	No	<input type="radio"/>	<input type="radio"/>

Almshouse Accommodation Application Form

Section 4; Your needs and support requirements (continued)

		First Applicant	Second Applicant
Disabilities Under the Disability Discrimination Act 1995 a person is considered to have a disability if they have a physical or mental impairment which has a substantial and long term effect on their ability to carry out normal day to day activities. Do you consider that you meet this definition of disability?	Yes	<input type="radio"/>	<input type="radio"/>
	No	<input type="radio"/>	<input type="radio"/>
Agencies Are there any agencies that provide you with care and support? <i>If yes, please provide details below.</i>	Yes	<input type="radio"/>	<input type="radio"/>
	No	<input type="radio"/>	<input type="radio"/>
Type of care/support provided:	Company/Organisation:		
Contact Name:	Contact Phone Number:		
Social Workers Do you have a named Social Worker? <i>If yes, please provide details below.</i>	Yes	<input type="radio"/>	<input type="radio"/>
	No	<input type="radio"/>	<input type="radio"/>
Local Authority:			
Contact Name:	Contact Phone Number:		

Almshouse Accommodation Application Form

Section 5: Your Health

Medical Conditions Please list any medical conditions that you have.	
First Applicant	Second Applicant

Allergies Please list any allergies that you have.	
First Applicant	Second Applicant

Almshouse Accommodation Application Form

Section 6: Your Income

To enable the trustees to assess your application, please provide the following information. Please include details of all sources of income and state how frequently you receive them (e.g. weekly, monthly or yearly).

		Amount	Frequency
Pensions	State retirement pension		
	Pension paid by a past employer		
	Private pension		
	Widow's or widower's pension		

Social Security Benefit	Pension Credit		
	Universal Credit/Housing Benefit		
	Any other benefits		

Employment/Self-Employment

If applicable, please inform us of your type of employment and hours of work.

First Applicant	Second Applicant
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Almshouse Accommodation Application Form

Section 6: Your Income (continued)

To enable the trustees to assess your application, please provide the following information. Please include details of all sources of income and state how frequently you receive them (e.g. weekly, monthly or yearly).

		Amount	Frequency
Other Income	Annuities		
	Bank Interest		
	Investments		
	Rental property or land that you own		
	Grants from a charity		
	Financial assistance from a relative/friend		
	From a trust fund		
	Any other income (please give details below)		

Other income details (if applicable):

Almshouse Accommodation Application Form

Section 7: Your Capital

	First Applicant	Second Applicant
Bank/Building Society Accounts	Current Balance: £ if you have more than one account, please total all balances.	Current Balance: £ if you have more than one account, please total all balances.
Shares	Current Value: £	Current Value: £
National Savings (e.g. National Savings Certificates, etc.)	Amount Held: £	Amount Held: £
Unit Trusts/OEICs	Current Value: £	Current Value: £
Premium Bonds	Amount Held: £	Amount Held: £

Section 8: Your Borrowing

Loans and Debts Do you have any loans or other debts outstanding? If so, please provide details.	
First Applicant	Second Applicant

Almshouse Accommodation Application Form

Section 10: Other Information

Convictions

Have you ever been convicted of a criminal offence? Please give full details below.

First Applicant

Second Applicant

Evictions

Have you ever been evicted from a tenancy? Please give full details below.

First Applicant

Second Applicant

Arrears

Do you have any outstanding rent arrears with your current or past landlords? Please give full details below.

First Applicant

Second Applicant

Almshouse Accommodation Application Form

Section 11: References

Please provide two referees. One should be someone who is not related to you, but who you have known for at least three years. The other, must be your current landlord (where applicable).

Reference 1 Full Name	
Reference 1 Address	
Reference 1 Phone Number	
Reference 1 Email Address	

Reference 2 Full Name	
Reference 2 Address	
Reference 2 Phone Number	
Reference 2 Email Address	

Almshouse Accommodation Application Form

Section 12: Assistance in completing this form

If this form has been filled in by someone other than the applicant(s), please tell us why they are filling in this form.

Reason(s)	
Relationship to Applicant(s)	
Phone Number	
Email Address	
Name of Person	
Signature of Person	
Date	

Almshouse Accommodation Application Form

WYGGESTONS & TRINITY
ALMSHOUSES

Section 13: Declaration

I/we believe that I am/we are eligible to apply to live in one of the Charity's almshouses.

I/we declare that the information given in this application is correct and complete to the best of my/our knowledge and belief. I/we understand that the Trustees would be entitled to terminate any appointment to an almshouse dwelling I/we may be allocated if my/our answers in this application form are untrue or misleading in any respect (for example, due to omitting or misstating relevant facts).

I/we have read this application form carefully and agree to abide by it should I/we be appointed to an almshouse.

I/we accept that if I am/we are appointed as a resident/residents I/we shall be a beneficiary/beneficiaries of the Charity and not a tenant/tenants. Any weekly sum I/we pay will be a maintenance contribution and not a rent.

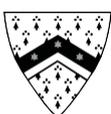
I/we confirm that I am/we are able to look after myself/ourselves and to live independently, with the assistance of family and social services if necessary.

First Applicant	Signature:	Date:
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Second Applicant	Signature:	Date:
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Final Check

Before sending us your application please ensure that you have completed all sections of the form and provided all relevant supporting documentation (see checklist on page 3).



Wyggestons

0116 255 9174
enquiries@wyggestons.org.uk
www.wyggestons.org.uk
160 Hinckley Road | Leicester | LE3 0UX



Trinity Hospital

0116 255 4829
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50 Western Boulevard | Leicester | LE2 7BU

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Section 14: Approval (office use only)

CEO approval	<input type="radio"/> Yes	Signature:
	<input type="radio"/> No	Date:
Comments/Queries:		



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