

Shared Ownership Application Form

The following questions are mandatory. Please tick the box to confirm.

Eligibility Questions

1.	Please confirm you are at least 18 years of age	
2.	Please confirm that your annual household income is less than £80,000	
3.	Please confirm you have a deposit and funds ready to cover your mortgage and moving costs	
4.	Please confirm you do not own or have interest in another property (unless you are a current a shared owner and are looking to move)	
5.	Please confirm you do not have any outstanding credit issues (i.e. unsatisfied defaults or county court judgments)	

The following questions are mandatory. Please fill out the following boxes.

Main Application

1.	Property you are applying for
2.	Plot number (if applying for a resale property, please put N/A)
3.	Second and third choice plots (if applying for a resale property, please put N/A)
	Second Choice
	Third Choice

The following questions are mandatory. Please fill out all questions.

About You

Is your application joint or single?	Joint		Single	
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How many bedrooms do you require?	1		2		3		4	
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Applicant One

Title: _____ **Surname:** _____ **First Name:** _____

Middle Name(s): _____ **Date of Birth:** _____

Address Line 1: _____ **Address Line 2:** _____

Address Line 3: _____ **Town:** _____

County: _____ **Postcode:** _____ **Preferred Telephone Number:** _____

Alternative Telephone Number: _____ **Email Address:** _____

Are you a serving member of the armed forces (MoD)?	Yes		No			
Are you a surviving partner of the armed forces?	Yes		No		N/A	
If yes, have you been bereaved within the last 24 months?	Yes		No		N/A	
Are you an ex-regular service personnel, honourably discharged within the last 24 months?	Yes		No		N/A	

What is your current employment status? Please click the relevant box.	Unemployed	
	Retired	
	Full Time Employed (30+ hrs/week)	
	Part Time Employed (-30 hrs/week)	
	Self Employed	
	Long Term Sickness	
	Student	
	Other	
<i>If other please provide detail</i>		

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Applicant Two

Title:	Surname:	First Name:
.....
Middle Name(s):	Date of Birth:	
.....	
Address Line 1:	Address Line 2:	
.....	
Address Line 3:	Town:	
.....	
County:	Postcode:	Preferred Telephone Number:
.....
Alternative Telephone Number:	Email Address:	
.....	

Are you a serving member of the armed forces (MoD)?	Yes		No			
Are you a surviving partner of the armed forces?	Yes		No		N/A	
If yes, have you been bereaved within the last 24 months?	Yes		No		N/A	
Are you an ex-regular service personnel, honourably discharged within the last 24 months?	Yes		No		N/A	

What is your current employment status? <i>Please click the relevant box.</i>	Unemployed	
	Retired	
	Full Time Employed (30+ hrs/week)	
	Part Time Employed (-30 hrs/week)	
	Self Employed	
	Long Term Sickness	
	Student	
	Other	
If other please provide detail		

The following 2 questions are mandatory. Please tick the relevant boxes

Your household

1.	How would you describe your household make up?	Single	
		Single with children	
		Couple	
		Couple with children	
		Sharing	

2.	Who else will be living in your home?		
	Name		Relationship
	DOB	Education / Working	Annual Gross Salary (£)
	Name		Relationship
	DOB	Education / Working	Annual Gross Salary (£)
	Name		Relationship
	DOB	Education / Working	Annual Gross Salary (£)
	Name		Relationship
DOB	Education / Working	Annual Gross Salary (£)	

The following questions are mandatory. Please select all the boxes that apply to your current situation.

Current Housing Situation

	Applicant 1	Applicant 2
A first-time buyer		
On the council housing waiting list		
A current homeowner		
A current shared owner		
A council or housing association tenant		
Living with friends/family		
A private renter		
Armed Forces accommodation		
<i>Other (Please specify)</i>		

Only complete this section if you are a current homeowner..

Current Housing Situation

Current Housing Situation	Applicant 1				Applicant 2			
	Yes		No		Yes		No	
Do you or anyone purchasing alongside you own a property (are listed on the title deeds) in the UK or abroad?								
<i>If yes please provide property address</i>								
Are you in the process of selling your property?								
<i>If yes what stage is the sale process at. No action taken yet. On the market. Offer accepted. Solicitors instructed. Contracts Exchanged.</i>								
<i>If known please state the date you expect to complete the sale of the property</i>								

Income

Shared Ownership is for those who have a total household income of **£80,000 a year or less outside London**. It's for people who can't afford to buy a home on the open market, but who can afford to buy and maintain a Shared Ownership home. The information you provide helps us to assess your eligibility for Shared Ownership. If you are considered eligible then Brighter Places and any mortgage lender who will help fund the purchase, will undertake more detailed additional checks on your income and expenditure.

Additional costs of buying a home could include mortgage, legal, administration, and valuation fees. It's important to make sure that you have enough savings to cover these as well as your deposit. **We advise that an applicant will need a minimum of £2,500 available.**

The following questions are mandatory. Please fill out the following boxes.

Income	Applicant 1	Applicant 2
What is your total gross annual income from employment excluding overtime and bonuses		
How much overtime, bonuses and commission do you normally earn in a year? If none, please enter '0'		

	Applicant 1	Applicant 2
What is your gross annual income from pension, investment, or other non-benefit sources? <i>If none, please enter '0'</i>		
Benefits		
Working tax credits per year. If none, please enter '0'		
Child benefit per year. If none, please enter '0'		
Child tax credits per year. If none, please enter '0'		
Disability allowance per year. If none, please enter '0'		
Guaranteed maintenance per year. If none, please enter '0'		
Housing benefit per year. If none, please enter '0'		
Universal Credit per year. If none, please enter '0'		
Any other income. If none, please enter '0'		
<i>Details of additional income</i>		
Savings		
How much do you have in savings? If none, please enter '0'		
How much of your savings will be used for the deposit? If none, please enter '0'		

Equal Opportunities

Confidential Information

Please specify your preferred method of communication, if other than in writing with normal sized print.

Audio Large Print Braille Other

In order to ensure that all applicants are treated fairly, could you please provide the following information, if you do not wish to provide the information, please tick prefer not to say.

Prefer not to say

Ethnic Group	Applicant 1	Applicant 2
Bangladeshi		
Chinese		
Indian		
Pakistani		
Other Asian Background		
African		
Caribbean		
Other Black Background		
White & Asian		
White & Black African		
White & Black Caribbean		
Other Mixed/Multiple Ethnic Group		
English/Welsh/Scottish/ Northern Irish/British		
Irish		
Gypsy or Traveller		
Other White Background		
Arab		
Any other Ethnic Group		
<i>If other, please state</i>		

Disability Information

The Equality Act 2010 defines disability as ‘a physical or mental impairment which has a substantial and long-term effect on a person’s ability to carry out normal day to day activities’. Do you consider yourself to have a disability or impairment that has (or would have without treatment) a substantial and long-term adverse effect on your ability to carry out one or more day to day activities?

Applicant One

Yes No Prefer not to say

Applicant Two

Yes No Prefer not to say

If you chose the answer 'Yes', please indicate the nature of your disability. If you have multiple disabilities, please select multiple boxes, or self-describe:

	Applicant 1	Applicant 2
Cognitive condition		
Hearing Impairment		
Long-term health condition (e.g. diabetes, Multiple Sclerosis, heart condition, epilepsy, chronic pain)		
Mental Health condition		
Mobility/Manual Dexterity		
Neurodiverse condition (e.g. dyslexia, dyscalculia, dyspraxia, Autism, ADHD, Tourette's)		
Visual Impairment		
Other		
<i>If other, please give details</i>		

Other Information

Please provide any other information relevant to your submission or any supporting information you wish to include

Confirmations and Declaration

The following questions are mandatory. Please tick the box to confirm. If you do not complete the checklist, your application is liable to be rejected.

Declaration

The applicant acknowledges that:

Brighter Places will only process the personal data of the applicant(s), or other named individuals, for the following purposes. The Help to Buy Agent will hold your information in accordance with the Data Protection Act 2018.

- + **Firstly**, for the purposes of processing your application for housing;
- + **Secondly**, Brighter Places may also share this information for the same purpose with our Independent Financial Advisors, should your application be successfully referred. We will notify you before referring your application form.
- + **Thirdly**, the information may be used for anonymised statistical surveys and analysis –please request a copy of the CORE Privacy Policy for more information. Brighter Places may pass your information in confidence to the Ministry of Housing, Communities and Local Government (MHCLG) and other third-party providers.

All information you give us on this form (and information resulting from contact with your landlord and/or employer) may be shared with the same only in relation to this application.

All information will be treated in the strictest confidence. Brighter Places reserve the right to take up any references relating to applicants as they see necessary and may also search the files of any credit reference agency which will keep a record of any such request.

In the interests of protecting public funds, Brighter Places may use the information you have provided on this form to prevent and detect fraud. Under Schedule 2 of the Data Protection Act 2018 the information may be disclosed for purposes of crime prevention and to detect fraud. Sensitive personal data such as racial or ethnic origin, offences (including alleged offences) and physical and mental disabilities are required under the Equal Opportunities monitoring statute.

Confirmation Statements

	Applicant 1	Applicant 2
The Applicant has read the 'Declaration' in full.		
The Applicant understands that as a tenant, they will be required to give up their rented home on the day of completion if they buy or rent a home through this application.		
The Applicant authorises Brighter Places to pass information submitted as part of its application to those organisations detailed in the 'Declaration' for the purposes identified in that section, including but not limited to, for the purposes of processing this application, credit reference agencies, statistical surveys.		

A reference to "the applicant" is a reference to the First Applicant (and Second Applicant unless specified otherwise).

Applicant One

Signed:

Date:

Applicant Two

Signed:

Date:
