A black screen with blue text

Description automatically generated

# **HOUSING REGISTER APPLICATION FORM**

We have enclosed a *Housing and Support Guide* which should be read prior to completing this form as it will give you information about apply to us for housing. A copy of this guide is also available online at [www.Stoll.org.uk/housing/apply-for-housing/](http://www.Stoll.org.uk/housing/apply-for-housing/)

Please complete all sections of this form. If a particular section does not apply to you, please write/type ‘not applicable; or ‘N/A.’

**The main eligibility criteria are that you must have:**

* **served in the British Armed Forces and**
* **have support needs due to disability or are vulnerable.**

If you need help in completing this form or are unsure on whether you are eligible, please contact us on 020 7385 2110 or email us on [applications@Stol.org.uk](mailto:applications@Stol.org.uk).

Carefully read Section 9 Data Protection and Section 10 Your Declaration and sign the form to show that you have read and understood it. We do not accept unsigned applications or those without all relevant supporting documentation and identification.

There is a checklist at the back of this form that you can use to check that you have all the supporting documents that are needed for you to register for housing.

Receipt of your registration will be acknowledged within 5 working days. Please contact us if you do not hear from us within that time by either email [applications@Stoll.org.uk](mailto:applications@Stoll.org.uk) or by calling us on 020 7385 2110.

Please send the completed form and supporting documentation to:

**Housing Registrations**

**The Stoll Foundation**

**Sir Oswald Stoll Mansions**

**446 Fulham Palace Road**

**London**

**SW6 1DT**

Or email to:

[**applications@Stoll.org.uk**](mailto:applications@Stoll.org.uk)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **APPLICANT DETAILS** | | | | | | |
|  | **You** | | | **Joint Applicant** | | |
| Surname |  | | |  | | |
| Title |  | | |  | | |
| Name(s) |  | | |  | | |
| Home No. |  | | |  | | |
| Work No. |  | | |  | | |
| Mobile No. |  | | |  | | |
| Email |  | | |  | | |
| Date of Birth |  | | |  | | |
| Marital status |  | | |  | | |
| Gender | Male | Female | Transgender | Male | Female | Transgender |
| Other | Prefer not to Say | | Other | Prefer not to Say | |
| Identify As | Male | Female | Non-Binary | Male | Female | Non-Binary |
| Other | Prefer not to Say | | Other | Prefer not to Say | |
| Address | | | | (address of joint applicant if different from yours) | | |
|  | | | |  | | |
|  | | | |  | | |
| Post Code |  | | |  | | |
| National Insurance No. | |  | |  | | |

1. **We will need a signed passport size photo, proof of identity and address for you and your joint applicant.**

Please fill in the following details about each **additional** person who will **live in the property** with you. (Not including you or your joint applicant).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Surname** | **First Name** | **Gender** | **Date of Birth** | **Relationship to you** |
| Person |  |  |  |  |  |
| Person |  |  |  |  |  |
| Person |  |  |  |  |  |
| Person |  |  |  |  |  |

1. **We will need a copy of the full birth certificate or passport for each additional person who will live in the property and proof that they are living with you.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SERVICE DETAILS** | | | | | | | | | | | | | | | | | |
| Name of qualifying person | | | | |  | | | | | | | | | | | | |
| Service No. | | | | |  | | | | | | | | | | | | |
| Service: | Royal Navy/Marines | | | | | R.A.F. | | | British Army | | | | Reservist | | | Merchant Navy | |
| Regiment/Branch/Corp | | | | | | | | | | Rank/Rate | | | | | | | |
| Date enlisted | | | | | | |  | | | | | | | | | | |
| Date discharged or to be discharged | | | | | | |  | | | | | | | | | | |
| **Reason for Discharge:** | | | Dismissal | | | | | Redundancy | | | | Retirement | | | | | Resignation |
| Medical Discharge | | | Administrative Discharge | | | | | | | Compulsory Withdrawal | | | | | Requested Early Leaver | | |
| Notice to Leave | | Compulsory Early Leaver | | | | | | | | Completed Engagement | | | | | Other | | |
| Were you wounded in service? | | | | | | | Yes | | | | No | | |  | | | |
| **Only complete this section if you are a widow, widower, partner, or civil partner of a deceased veteran** | | | | | | | | | | | | | | | | | |
| Date of death | | | |  | | | | | | | | | | | | | |
| Circumstances of death (please include whether death occurred in service). | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |

1. **We will need a photocopy of the service identity card (if still serving) or a copy of your discharge papers.**

|  |  |  |
| --- | --- | --- |
| **HEALTH DETAILS** | | |
| You must have a disability, physical or mental, to be eligible for housing with The Stoll Foundation. **Please provide details of what the disability is from a professional medical authority that confirms this.** | | |
| Do you or your joint applicant have a disability? | Yes  \* | No |
| Are you or your joint applicant registered disabled? | Yes  \* | No |
| Do you of your joint applicant use a wheelchair? | Yes  \* | No |
| If you, or anyone who will be living with you have any medical condition(s) or special needs which would affect the type of housing you need and which you would like us to consider when assessing your application, **please give us the details below (continue on a separate sheet if necessary):** | | |
| \* | | |
|  | | |
|  | | |
|  | | |

1. **We will need details from a medical professional confirming your medical condition/disability.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INCOME DETAILS** | | | | | |
| **Economic Status** | **You** | **Joint Applicant** | **Your employer’s name and address** | | |
| Self employed |  |  |  | | |
| Employed full time |  |  |  | | |
| Employed part time |  |  |  | | |
| Registered as unemployed or a job seeker |  |  |  | | |
| Full time student |  |  |  | | |
| Volunteering |  |  | **Joint applicant employer name and address** | | |
| Not looking for work or at home |  |  |  | | |
| Long term sick or disabled |  |  |  | | |
| Retired |  |  |  | | |
| **Income** | | | | **You**  **£** | **Joint Applicant**  **£** |
| **Weekly income after deductions** (Not including housing benefit, council tax and interest from savings) | | | |  |  |
| **Take home pay** (earnings from any paid work after tax and national insurance and attachment of earnings deductions) | | | |  |  |
| **Occupation pension** (including SERPS and military service) | | | |  |  |
| **Child benefit** | | | |  |  |
| **Other state benefits** (including jobseekers’ allowance, universal credit, PIP) | | | |  |  |
| **Other income** (war pension scheme WPS, war disability pension, guaranteed income payment GIP, armed forces compensation scheme AFCS) | | | |  |  |
| **Tax credits** (child/working) | | | |  |  |
| **Total Weekly Income** | | | |  |  |
| **Savings and Investments** | | | | **You**  **£** | **Joint Applicant**  **£** |
| Total amount of savings and investments | | | |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CURRENT HOME** | | | | | | | | |
| **Please tell us about your current housing situation** | | | | | | | | |
| Council or Housing Association | | | | Owner Occupier | | | Service Accommodation | |
| Renting Privately | | | | Tied to Employment | | | Care or Support home | |
| Living with Friends/Relatives | | | | Hostel / Bed & Breakfast | | | Statutorily Homeless | |
| Caravan/Mobile Home | | | | Refuge | | | Hospital/Other Institution | |
| Other , please specify | | | | | | | | |
| Do you have a blue badge (Disabled Parking) | | | | | Do you own a car and require parking? | | | |
| What local authority do you live in? | | |  | | | | | |
| **How would you describe the reason for needing to leave your current home** | | | | | | | | |
| Have been asked to leave | | Under notice of eviction | | | | Have been evicted | | Medical reasons |
| To be nearer work | Suffering harassment or abuse | | | | | Breach of tenancy | | Need support |
| Other , please specify | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your current landlords’ name and address** | | | | | | | | | |
| Name |  | | | | | | | | |
| Address |  | | | | | | | | |
| Post Code |  | | | | | | | | |
| Email address |  | | | Contact number |  | | | | |
| Tenancy Start Date |  | | | Tenancy (to) End Date |  | | | | |
| Tenancy Type | Assured | Secure | Fixed Term | | Licence | | Tied | None | |
| Do you have any debt or rent arrears with your current or any previous landlord? | | | | | | Yes | | | No |
| If yes, do you have an arrangement in place to repay the debt/arrears? | | | | | | Yes | | | No |

1. **We will need a copy of your Notice to Quit; Notice of Seeking Possession; Termination Notice if you have been served one.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **OTHER INFORMATION** | | | | | | | | | | |
| Do you or any person who will be living with you have any criminal conviction(s) which are not spent? | | | | | | Yes  \* | | | No | |
| If yes, please give details. \* | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| Have you ever been served a notice for breach of tenancy including ASB or arrears? | | | | | | Yes  \* | | | No | |
| If yes, please give details. \* | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| Do you or anyone listed on this application have any connection to any member of Staff or Trustee of Sir Oswald Stoll Mansions / The Stoll Foundation Housing & Support? | | | | | | Yes  \* | | | No | |
| If yes, please give details. \* | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| Do you have any pets? | Yes  \* | No | Would you be prepared to re-home your pets? | | | | | Yes | | No |
| Please give details of what type of pet(s) you have and how many. \* | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| Do you or your joint applicant have a legal or financial interest in any property whether in the UK or overseas? | | | | | Yes | | No | | | |
| **Please tell us in which of The Stoll Foundation community you would like to live (mark all that apply), (**properties will be offered in any of our schemes where available, we will try our best to offer in your choice of areas) | | | | | | | | | | |
| Sir Oswald Stoll Mansions (Fulham, London) | | | | Chiswick War Memorial Homes (Chiswick, London) | | | | | | |
| Countess of Wessex House (Bedfont, Middlesex) | | | | Banstead Court (East Acton, London) | | | | | | |
| Centenary Lodge (Aldershot, Hampshire) | | | | Kings Road Park (Fulham, London) | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DIVERSITY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **You** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ethnic Origin -** Please tell us your ethnicity below. Providing this information allows us to check that people from different groups are accessing our services equally. You don’t have to tell us if you’d prefer not to, and it won’t affect your chances of being housed. | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| White | British | | | | | | | | | | | | | | | English | | | | Scottish | | | Welsh | | | | Irish | |
| Northern Irish | | | | | | | | | | | | | | | Irish Traveller | | | | Romany | | | Gypsy | | | | Other | |
| Mixed | White & Asian | | | | | | | | | | | White & Black African | | | | | | | | | White & Black Caribbean | | | | | | | Other |
| Asian / Asian British | | | | | | Bangladeshi | | | | | | | | | | Indian | | | Pakistani | | | | | Other : | | | | |
| Black / Black British | | | | | | African | | | | | | | | | | Caribbean | | | Other : | | | | | | | | | |
| Other Ethnic Group | | | | | | Arab | | | | | | | | | | Chinese | | | Other : | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nationality –** Please tell us where you were born. | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| UK | | Ireland | | | | | | | | Other Country  - Please tell us where? | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Religion or Belief -** \*Christian includes Church of England, Catholic, Protestant and all other Christian denominations | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| No Religion | | | | Atheist | | | | | | | | | | Buddhist | | | | | | \*Christian | | | | | Hindu | | | |
| Jewish | | | | Muslim | | | | | | | | | | Sikh | | | | | | Other : | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sexual Orientation -** We have asked you to tell us your religion and sexuality as this may be important when responding to problems people have, for example, harassment. This information is also used to ensure fair treatment for all residents and to check that everyone is accessing our services equally. | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| Heterosexual (Straight) | | | | | | | | Bisexual | | | | | Homosexual (Gay/Lesbian) | | | | | | | | | Other : | | | | | | |
| **Joint Applicant** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ethnic Origin -** Please tell us your ethnicity below. Providing this information allows us to check that people from different groups are accessing our services equally. You don’t have to tell us if you’d prefer not to, and it won’t affect your chances of being housed. | | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | |
| White | | | British | | | | | | | | | | | | | | English | | | Scottish | | | Welsh | | | | Irish | |
| Northern Irish | | | | | | | | | | | | | Irish Traveller | | | | | Romany | | Gypsy | | | | Other | |
| Mixed | | White & Asian | | | | | | | | | White & Black African | | | | | | | | | | White & Black Caribbean | | | | | | | Other |
| Asian / Asian British | | | | | | | Bangladeshi | | | | | | | | | | | Indian | | | Pakistani | | | Other : | | | | |
| Black / Black British | | | | | | | African | | | | | | | | | | | Caribbean | | | Other : | | | | | | | |
| Other Ethnic Group | | | | | | | Arab | | | | | | | | | | | Chinese | | | Other : | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nationality –** Please tell us where you were born. | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| UK | | Ireland | | | | | | | | Other Country  - Please tell us where? | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Religion or Belief -** \*Christian includes Church of England, Catholic, Protestant and all other Christian denominations | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| No Religion | | | | Atheist | | | | | | | | | | | Buddhist | | | | | | \*Christian | | | | Hindu | | | |
| Jewish | | | | | Muslim | | | | | | | | | | Sikh | | | | | | Other : | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sexual Orientation -** We have asked you to tell us your religion and sexuality as this may be important when responding to problems people have, for example, harassment. This information is also used to ensure fair treatment for all residents and to check that everyone is accessing our services equally. | | | | | | | | | | | | | | | | | | | | | | | | | Prefer Not to Say | | | |
| Heterosexual (Straight) | | | | | | | | | Bisexual | | | | | | | | Homosexual (Gay/Lesbian) | | | | | | | | Other : | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **COMMUNICATION** | | | | | | | | | | |
| Do you have any specific communication requirements? (Please mark all that apply.) | | | | | | | | | | |
| Audio | Interpreter | | | Translation | Sign Language | | | Large Print | | Braille |
| If English is not your first or preferred language, are you able to? (Please mark all that apply.) | | | | | | | | | | |
| Write English | | | | Read English | | | Speak English | | | |
| If English is not your preferred or first language, please tell us which language is: | | | | | | | | | | |
| Would you like to receive information via (tick all that apply) | | | | | | Text Message (SMS) | | | Email | |
| Where did you hear about applying to The Stoll Foundation | | | | | |  | | | | |
|  | | | | | | | | | | |
| If you would like to give someone permission to be able to discuss your application with us on your behalf, please complete the details below: | | | | | | | | | | |
| Name | |  | | | | | | | | |
| Company (if applicable) | |  | | | | | | | | |
| Address | |  | | | | | | | | |
| Post Code | |  | | | | | | | | |
| Contact Phone No. | | |  | | | | | | | |
| Contact Email Address | | |  | | | | | | | |

|  |
| --- |
| **YOUR DATA PROTECTION** |
| We take our data protection responsibilities seriously. We collect, store and process data in line with UK data protection law. The Stoll Foundation is the Data Controller for the personal information that you give to us. This means that we’re the people responsible for processing it and for keeping it accurate and up to date. We use your information to manage your relationship with us, including processing your tenancy application, providing services to you under your tenancy agreement and providing support services at your request. We have set out all the ways in which we use your information and details of any third parties that we may transfer your information to in our Fair Processing Notice, available on our website [www.The Stoll Foundation.org.uk](http://www.stoll.org.uk). For further details, you can contact the Data Officer [info@Stoll.org.uk](mailto:info@Stoll.org.uk)  You can also write to us: The Stoll Foundation, Sir Oswald Stoll Mansions, 446 Fulham Road, London SW6 1DT. |

Staple

**MAIN APPLICANT’S**

signed photo here

Staple

**PARTNER’S**

signed photo here

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **YOUR DECLARATION** | | | | |
| Failure to provide the required / requested information may result in the application being rejected.  Subsequent discovery that information on this application form is false, or you fail to report any change in circumstances that affect this application will result in legal action to repossess any home we have let to you.  If I accept a tenancy with The Stoll Foundation, I understand that my details may be passed on to the utility suppliers to assist with any billing queries during and at the end of my tenancy.  I understand that no sub-letting is permitted under terms of a The Stoll Foundation tenancy and may result in legal action.  I agree to declare any other offer of housing (whether accepted or not) from any local authority, housing association or other housing provider.  I confirm that, as far as I know, the information I have given in connection with this application for housing is correct.    I will inform The Stoll Foundation immediately if there is any change in my circumstances.  I authorise The Stoll Foundation to undertake checks with any organisation to validate my application. | | | | |
| Your Name |  | | Joint Applicant Name |  |
| Your Signature |  | | Joint Applicant Signature |  |
| Date |  | |  | |
| **Office Use Only** | | Application Reference Number |  | |

|  |  |
| --- | --- |
| **REGISTRATION CHECKLIST** | |
| We will not process your application without a fully completed application form, confirmation of your service in the British Armed Forces, confirmation of your medical condition and photographic identification and proof of address, these are the numbered items that are coloured **grey**. All other items are optional and are dependent on your personal circumstances. The Stoll Foundation aims to process your application within 10 working days of receipt, subject to all submitted proofs and identification being attached. | |
| **A.** | Signed Passport Size Photo (You and Joint Applicant) |
| Photo Identification (Passport, Drivers Licence) |
| Proof of Address (Council Tax, NHS, Tax letter) |
| **B.** | Birth Certificate/Passport for each additional person who will be living with you. |
| If you do not have full custody of any children, we will need a copy of the court papers where your custody arrangements are specified. |
| **C** | Service Identity Card / Discharge Papers / Verification of service certificate |
| **D** | GP, hospital, consultant or other correspondence confirming medical condition/disability |
| **E** | Eviction Letter/Notice |

A black screen with blue text

Description automatically generated

**HOUSING AND SUPPORT GUIDE**

Thank you for your interest in being housed by The Stoll Foundation. We welcome applications from eligible veteran’s needing support. Please read this document carefully, if you are unsure or require help, contact us on 0207385 2110 or email us on [applications@Stoll.org.uk](mailto:applications@Stoll.org.uk).

**What housing does The Stoll Foundation offer?**

We can house single people, couples, and families into our 1–3-bedroom flats and houses across London and Aldershot areas.

**Who can apply for housing at The Stoll Foundation?**

Those who have served in the British Armed Forces or are the widow, widower or partner of a deceased service person AND

Have a disability – physical or mental, including at risk of homelessness.

Where we have available properties, you can also apply for housing at The Stoll Foundation if you are vulnerable - **in need of support, or protection because of age, disability, risk of abuse or neglect.**

**How do you apply for housing at The Stoll Foundation?**

Applying for housing at The Stoll Foundation comes in 2 stages:

**Stage 1 – Housing Registration**

* **Provide Basic Information:** At this stage, you will fill out a registration form to give details about yourself and any others who will live with you.
* **Eligibility Assessment:** The Stoll Foundation will review your application to confirm your eligibility and check whether they have suitable properties for your needs.

**Stage 2 – Supported Assessment**

* **Assessment of Support Needs:** If your application progresses to Stage 2, The Stoll Foundation’s support team will schedule an assessment. This can be done either face-to-face or online.
* **Detailed Support Evaluation:** In this assessment, The Stoll Foundation will review your support needs and any relevant risk factors to determine the level and type of support they can provide.

**How are my support needs assessed?**

We look at several factors including, health and safety in the home, money and finances to health and wellbeing. The Stoll Foundation provides support services for tenants with low to medium needs. This involves provision of an ad-hoc service where you can access support when you need it, or we can create a support plan with you and help you obtain your goals with meetings during office hours (9am to 5pm). We also hold regular community and scheme events, trips, wellbeing, and employment courses. The Stoll Foundation also make referrals to veteran’s charities who may also provide support, working together to enable you to live independently where possible.

Receipt of your application will be acknowledged within 5 working days. Please contact us if you do not hear from us within that time by either email [applications@Stoll.org.uk](mailto:applications@Stoll.org.uk) or by calling us on 020 7385 2110.

Please send the completed application form and supporting documentation to:

**Supported Housing Application**

**The Stoll Foundation**

**Sir Oswald Stoll Mansions**

**446 Fulham Palace Road**

**London**

**SW6 1DT**

Or email to:

[**applications@Stoll.org.uk**](mailto:applications@Stoll.org.uk)