

# Housing Register Change of Circumstances Form

Please fill in section 1 and every other section where you have a change in your circumstances.

## 1. Main applicant's details (You must complete this section)

<b>Your housing application reference number:</b>
<b>Title:</b> Mr/Mrs/Ms/Miss
<b>Forename:</b>
<b>Surname:</b>
<b>Current address (where you are living now):</b>
Postcode:
<b>Previous address (please fill in this box if you have moved and not told us):</b>
Postcode:
<b>Home telephone number:</b>
<b>Work telephone number:</b>
<b>Mobile:</b>
<b>Email address:</b>
<b>Date of birth:</b>

**2. Only complete this section if you are reporting a change of address**

**If you have a new landlord please tell us their name and address:**

Postcode:

**Telephone number:**

**Please tell us what sort of home you are living in now (please tick)**

<input type="checkbox"/> House	<input type="checkbox"/> Caravan / mobile home
<input type="checkbox"/> Flat	<input type="checkbox"/> Bungalow
<input type="checkbox"/> Studio	<input type="checkbox"/> Room(s) in shared accommodation
<input type="checkbox"/> Maisonette*	<input type="checkbox"/> Other (Please specify) _____

\* a **maisonette** is a self-contained flat, usually on two floors, which has its own front door from the outside.

**Please tell us about the rooms in the home where you live now.**

	<b>Please tell us how many of these rooms you have</b>	<b>Do you share these rooms with anyone?</b>	
Bedrooms		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Living/Dining Rooms		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**How would you describe your new housing situation? (please tick one box)**

<input type="checkbox"/> An owner occupier	<input type="checkbox"/> Renting from a private landlord	<input type="checkbox"/> In prison
<input type="checkbox"/> Staying with friends	<input type="checkbox"/> In Bed & Breakfast accommodation	<input type="checkbox"/> In an institution
<input type="checkbox"/> Staying with relatives	<input type="checkbox"/> In a hostel	<input type="checkbox"/> In hospital
<input type="checkbox"/> In armed forces accommodation	<input type="checkbox"/> In tied accommodation (provided with your job)	<input type="checkbox"/> Of no fixed address
<input type="checkbox"/> Other (please state)		
<input type="checkbox"/> In accommodation arranged through another local authority If yes, please tell us the kind of accommodation and the local authority		

**3. Only complete this section if you want to add one or more persons to your housing application**

Surname	First name	Gender	Date of birth	Relationship to you the applicant (husband/wife brother/son etc)	Ethnicity

**4. Only complete this section if you want to remove one or more persons from your application:**

Surname	First name	Date of birth

**5. Only complete this section if you have any other change in circumstance not mentioned above.**

Please tell us about any other change in circumstance for you or a member of your household e.g. started a new job, changed a job, a change in health/medical condition.

**Declaration:**

I/We confirm that the information given in this form is correct and to the best of my/our knowledge.

I/We understand that any information that is untrue or withheld is a criminal offence under the Housing Act 1996 and may result in my/our prosecution.

I/We understand that this offence may result in my/our application being removed from the housing register and/or the loss of any tenancy that may have been given to me/us by the council or a housing association.

I/We undertake to notify the council of any future change in my/our circumstances as declared on this form.

I/We authorise Haringey Council to approach other agencies, such as employers, benefit agency, credit referencing agencies as well as other council departments to confirm any details.

<b>Main Applicant</b>	<b>Joint Applicant</b>
Signed	Signed
Date	Date

**Please hand this form in to one of our two Customer Service Centres at:**

Wood Green: Ground Floor,  
48 Station Road, N22 7TY

South Tottenham: Apex House,  
820 Seven Sisters Road, N15 5PQ

**or you can email the scanned form to the following email address:**

[housing.registration@haringey.gov.uk](mailto:housing.registration@haringey.gov.uk)

**or post the form to:**

Housing Assessment Team  
1<sup>st</sup> Floor, Apex House  
820 Seven Sisters Road  
London N15 5PQ