

# APPLICATION FORM

PLEASE READ THE ACCOMPANYING INFORMATION CAREFULLY  
BEFORE COMPLETING THIS APPLICATION FORM

Please fill in this form in **BLOCK CAPITALS**, then send it back to us at the address on the back of this form.  
We will only consider your application if all sections are fully completed. Incomplete applications will be returned.

Which programme(s) are you applying for? (Please tick all that apply)	
<input type="checkbox"/> New Build HomeBuy (part buy, part rent) <input type="checkbox"/> Rent to HomeBuy / Discounted Rent (rent first, buy later) <input type="checkbox"/> HOLD (Home Ownership for people with Long-term Disabilities) <input type="checkbox"/> Extra care / over 55 shared ownership	If you are interested in a particular development or property, please state which one: <input type="text"/> Please state name of housing association: <input type="text"/>
<input type="checkbox"/> HomeBuy Direct (equity loan – specific new build development) <input type="checkbox"/> First Time Buyers' Initiative (equity loan – specific new build development)	If you are applying for a specific new build development, please state which one: <input type="text"/> Please state name of developer: <input type="text"/>

Have you previously applied for low cost home ownership with Moat? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, what was your reference number? <input type="text"/>
If you are already registered with another HomeBuy Agent, please state which one:	<input type="text"/>

Please answer the following questions	Applicant 1	Applicant 2
1. Do you have a gross household income of less than £60,000 per annum?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Do you have access to the required savings to cover the cost of buying? (please refer to our leaflet 'Am I Eligible')	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Do you have personal debts eg car loan, credit card?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, are these debts below £15,000? (excluding Student Loans Company)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. If you are self employed, can you provide a minimum of three years of accounts or evidence of income?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Have you ever been refused a mortgage?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Have you ever had a home repossessed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Have you ever been declared bankrupt?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, has this been discharged?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Have you ever had any County Court Judgements (CCJs)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, have these been satisfied?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Are you currently entered into an IVA (individual voluntary arrangement)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
10. Have you ever failed to keep up payments on a loan or any form of credit agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
11. Have you been in mortgage or rent arrears or in breach of your tenancy agreement within the last twelve months?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
12. I am aware that I am likely to need a deposit to obtain a mortgage to purchase a property.	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
13. If accepted for Rent to HomeBuy, I agree to save the discount from my rent towards a deposit.	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
14. I am committed to entering into home ownership on a part buy / part rent basis now or at a later stage (subject to eligibility and housing association approval)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If you have answered yes to any of the questions from 5 to 11, please provide further details on a separate sheet.		

Personal details	Applicant 1		Applicant 2		
Please include details of Applicant 2 where they are to be included on the mortgage for the new property. If Applicant 2 will not be included on the mortgage please enter their details in the section where we ask who else will be living with you.					
Gender (please tick)	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Title (Ms/Mr/Mrs/Miss/Other)					
First name					
Surname					
Date of birth					
Address					
Postcode					
How long have you lived there?					
Home telephone number					
Mobile telephone number					
Work telephone number					
Email address					
How many bedrooms do you require? The maximum property size we can allow applicants to purchase is one bedroom more than required			One <input type="checkbox"/>	Two <input type="checkbox"/>	
			Three <input type="checkbox"/>	3+ <input type="checkbox"/>	
Please describe the composition of the household to be housed.	Single <input type="checkbox"/>		Couple <input type="checkbox"/>		
	Single with children <input type="checkbox"/>		Couple with children <input type="checkbox"/>		
	Number of children <input type="text"/>		Number of children <input type="text"/>		
Who else will be living with you?  Please provide details of anyone who will be living with you at the new property, including the estimated date of birth for any expected children	Full Name	Gender	Relationship to Applicant 1	Date of Birth	Full-time education/working
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
State the local authority areas you would be prepared to move into, in priority order. If you wish to purchase a home in a specific town or village, state the local authority in which it is situated	1	3			
	2	4			
Please state if you have a local connection to these areas - these can include living and / or working in area / children at school in area / family in area					
<input type="text"/>					

Present circumstances				
	Applicant 1	Applicant 2	Applicant 1	Applicant 2
Are you:				
A council tenant - renting	<input type="checkbox"/>	<input type="checkbox"/>		
A housing association tenant - renting	<input type="checkbox"/>	<input type="checkbox"/>		
Renting from your employer	<input type="checkbox"/>	<input type="checkbox"/>		
Living with family or friends	<input type="checkbox"/>	<input type="checkbox"/>		
Renting privately	<input type="checkbox"/>	<input type="checkbox"/>		
On a council housing waiting list	<input type="checkbox"/>	<input type="checkbox"/>		
A current home owner; this includes shared owners	<input type="checkbox"/>	<input type="checkbox"/>		
A previous home owner	<input type="checkbox"/>	<input type="checkbox"/>		
Temporary accommodation provided by local authority	<input type="checkbox"/>	<input type="checkbox"/>		
Other (Please state) <input type="text"/>				
If you are on a council waiting list please say where and give your reference number	<input type="text"/> Local authority <input type="text"/> Reference number	<input type="text"/> Local authority <input type="text"/> Reference number		
			How many bedrooms does your current home have? <input type="text"/>	<input type="text"/>
			Is it a flat or a house? <input type="text"/>	<input type="text"/>
			If you are a private tenant, council or housing association tenant, please give the name, address and telephone number of your landlord or housing officer in the box(es) below:	
			Applicant 1	Applicant 2
			<input type="text"/>	<input type="text"/>

## Present circumstances Continued

Tick any boxes relevant to your household situation (You may be required to provide documents to support this, e.g. letters/statements/certificates from your doctor, council, landlord, police etc.) Please also supply further details on a separate sheet if necessary.

First Applicant	Second Applicant
<input type="checkbox"/> Poor health	<input type="checkbox"/> Poor health
<input type="checkbox"/> Partner of deceased service personnel	<input type="checkbox"/> Partner of deceased service personnel
<input type="checkbox"/> Poor condition of property	<input type="checkbox"/> Poor condition of property
<input type="checkbox"/> Harassment or neighbourhood dispute	<input type="checkbox"/> Harassment or neighbourhood dispute
<input type="checkbox"/> Threatened with homelessness	<input type="checkbox"/> Threatened with homelessness
<input type="checkbox"/> Job relocation from or to another part of the country	<input type="checkbox"/> Job relocation from or to another part of the country
<input type="checkbox"/> Relationship breakdown	<input type="checkbox"/> Relationship breakdown
<input type="checkbox"/> Extreme financial difficulty	<input type="checkbox"/> Extreme financial difficulty
<input type="checkbox"/> Overcrowding in present home	<input type="checkbox"/> Overcrowding in present home
<input type="checkbox"/> None of the above	<input type="checkbox"/> None of the above

## Current and previous home owners and mortgages

When purchasing or renting a property through the HomeBuy scheme, applicants can only retain an interest in another property where the sale of that property is prohibited by a Court Order.

Have you (or Applicant 2) ever owned or partly owned a property in the UK or abroad? Yes  No

Provide details of the date the property was/is to be sold / / and the amount of equity you have/will receive: £

If you currently own or part own a property, please provide the address of the property to be sold:

How many bedrooms does the property have?  Is it a flat or a house?

Are you currently a shared owner? Yes  No  If Yes, what % equity do you own?  %

With which housing association

How much mortgage do you have outstanding (as either a Shared or Full owner)? £

What is the approximate current full value of the property? £

Employment details	Applicant 1	Applicant 2
Job title/Occupation	<input type="text"/>	<input type="text"/>
Name of employer	<input type="text"/>	<input type="text"/>
Place of work and address Please give the place and address of the location where you work ie Teachers - school details, Police and Fire - station details etc.	<input type="text"/>	<input type="text"/>
Postcode	<input type="text"/>	<input type="text"/>
Full time or part time?	<input type="text"/>	<input type="text"/>
Are you permanently employed?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you on a fixed term contract?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contract start date	<input type="text"/>	<input type="text"/>
Contract end date	<input type="text"/>	<input type="text"/>
How long have you worked in your current role?	<input type="text"/>	<input type="text"/>
How long have you worked in your current profession?	<input type="text"/>	<input type="text"/>

## Key worker applicants only

If you are a key worker applicant please select your employer type and job role from the table below. Please note that with joint applications only one applicant is required to be a key worker in order to access key worker funding or properties.

If you are not a key worker please proceed to Income, expenditure and loans section.

Occupation	Applicant 1	Applicant 2
NHS	Nurse <input type="checkbox"/>	Nurse <input type="checkbox"/>
	Cancer Services Staff <input type="checkbox"/>	Cancer Services Staff <input type="checkbox"/>
	Diagnostic Staff <input type="checkbox"/>	Diagnostic Staff <input type="checkbox"/>
	Mental Health Professional <input type="checkbox"/>	Mental Health Professional <input type="checkbox"/>
	Allied Health Professional <input type="checkbox"/>	Allied Health Professional <input type="checkbox"/>
	Pharmacist <input type="checkbox"/>	Pharmacist <input type="checkbox"/>
	NHS Clinical Staff <input type="checkbox"/>	NHS Clinical Staff <input type="checkbox"/>
	NHS Social Worker <input type="checkbox"/>	NHS Social Worker <input type="checkbox"/>
	Qualified Nursery Nurse <input type="checkbox"/>	Qualified Nursery Nurse <input type="checkbox"/>
Police	Police Officer <input type="checkbox"/>	Police Officer <input type="checkbox"/>
	Police Community Support Officer <input type="checkbox"/>	Police Community Support Officer <input type="checkbox"/>
Education	School Teacher <input type="checkbox"/>	School Teacher <input type="checkbox"/>
	Teacher (Further education including sixth form colleges) <input type="checkbox"/>	Teacher (Further education including sixth form colleges) <input type="checkbox"/>
	Children's Social Worker <input type="checkbox"/>	Children's Social Worker <input type="checkbox"/>
	Qualified Nursery Nurse <input type="checkbox"/>	Qualified Nursery Nurse <input type="checkbox"/>
Probation Service	Probation Officer <input type="checkbox"/>	Probation Officer <input type="checkbox"/>
	Senior Probation Officer <input type="checkbox"/>	Senior Probation Officer <input type="checkbox"/>
	Probation Service Officer <input type="checkbox"/>	Probation Service Officer <input type="checkbox"/>
	Trainee Probation Officer <input type="checkbox"/>	Trainee Probation Officer <input type="checkbox"/>
Prison Service	Prison Officer <input type="checkbox"/>	Prison Officer <input type="checkbox"/>
	Operational Support Grade <input type="checkbox"/>	Operational Support Grade <input type="checkbox"/>
	Nursing Staff <input type="checkbox"/>	Nursing Staff <input type="checkbox"/>
	Industrials <input type="checkbox"/>	Industrials <input type="checkbox"/>
	Instructional Officer <input type="checkbox"/>	Instructional Officer <input type="checkbox"/>
Local Authority	Local Authority Planner <input type="checkbox"/>	Local Authority Planner <input type="checkbox"/>
	Rehabilitation Officer for the visually impaired <input type="checkbox"/>	Rehabilitation Officer for the visually impaired <input type="checkbox"/>
	Qualified Nursery Nurse <input type="checkbox"/>	Qualified Nursery Nurse <input type="checkbox"/>
	Local Authority Clinical Staff <input type="checkbox"/>	Local Authority Clinical Staff <input type="checkbox"/>
	Adult Social Worker <input type="checkbox"/>	Adult Social Worker <input type="checkbox"/>
	Speech and Language Therapist <input type="checkbox"/>	Speech and Language Therapist <input type="checkbox"/>
	Occupational Therapist <input type="checkbox"/>	Occupational Therapist <input type="checkbox"/>
	Educational Psychologist <input type="checkbox"/>	Educational Psychologist <input type="checkbox"/>
Connexions Personal Advisor <input type="checkbox"/>	Connexions Personal Advisor <input type="checkbox"/>	

Occupation	Applicant 1	Applicant 2
Firefighters  MoD	Fire & Rescue Services (uniformed staff) <input type="checkbox"/>	Fire & Rescue Services (uniformed staff) <input type="checkbox"/>
	Regular Service Personnel <input type="checkbox"/>	Regular Service Personnel <input type="checkbox"/>
	Clinical Staff <input type="checkbox"/>	Clinical Staff <input type="checkbox"/>
	MoD Police Officers <input type="checkbox"/>	MoD Police Officers <input type="checkbox"/>
	Uniformed staff in the Defence Fire Service <input type="checkbox"/>	Uniformed staff in the Defence Fire Service <input type="checkbox"/>
	Full Time Reserve Service <input type="checkbox"/>	Full Time Reserve Service <input type="checkbox"/>
None of the above <input type="checkbox"/>	None of the above <input type="checkbox"/>	
Job Title <input type="text"/>	Job Title <input type="text"/>	
Employer <input type="text"/>	Employer <input type="text"/>	
<b>NHS</b>		
If you work for the NHS, which trust?	<input type="text"/>	<input type="text"/>
<b>Teachers</b>		
Do you have Qualified Teacher Status?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Main subject taught	<input type="text"/>	<input type="text"/>
Classification of school	Primary School <input type="checkbox"/> Secondary School <input type="checkbox"/> Sixth Form College <input type="checkbox"/> Further Education College <input type="checkbox"/> Special School <input type="checkbox"/> Nursery <input type="checkbox"/>	Primary School <input type="checkbox"/> Secondary School <input type="checkbox"/> Sixth Form College <input type="checkbox"/> Further Education College <input type="checkbox"/> Special School <input type="checkbox"/> Nursery <input type="checkbox"/>
Is your school government funded?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you have or are you working towards an FE teaching qualification?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Social Workers</b>		
Do you have the recognised social worker degree/diploma?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Occupational Therapists/Educational Psychologists/Nursery Nurses</b>		
Are you qualified?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Environmental Health Officer / Practitioners</b>		
Who are you employed by?	Local Authority <input type="checkbox"/> Government Agency <input type="checkbox"/> NHS <input type="checkbox"/> Other Public Sector Agency <input type="checkbox"/> (please state) <input type="text"/>	Local Authority <input type="checkbox"/> Government Agency <input type="checkbox"/> NHS <input type="checkbox"/> Other Public Sector Agency <input type="checkbox"/> (please state) <input type="text"/>
Do you hold an EHRB Certificate of Registration or EHRB Diploma in Environmental Health?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Highways Agency Traffic Officer Service</b>		
Classification of role	Supervisor (on or off road) <input type="checkbox"/> Traffic Officer <input type="checkbox"/> RCC Operator <input type="checkbox"/>	Supervisor (on or off road) <input type="checkbox"/> Traffic Officer <input type="checkbox"/> RCC Operator <input type="checkbox"/>



## Equal opportunities

It is against the law and our equal opportunities policy to discriminate against anyone because of their sex, colour, age, race, religion, disability or sexual orientation. In order to ensure that we do not discriminate, we need to keep records. If you do not answer this question it will not affect your application in any way. Sensitive personal data such as ethnic origin and physical or mental disabilities are required under the Equal Opportunities Monitoring statute. Under section 29(3) of the Data Protection Act 1998 the information may be disclosed for purposes of crime prevention and detection

The answers to questions marked with \* could have an impact on your ability to raise a mortgage. Your answers will not affect your eligibility with Moat, however we may refer you to an independent mortgage advisor before accepting your application.

	Applicant 1		Applicant 2	
Are you a British or EU/EEA citizen?*	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If not, is your passport stamped with "Indefinite leave to remain"?*	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Please state your country of origin	<input type="text"/>		<input type="text"/>	
<b>How would you describe your ethnic origin?</b>				
	Applicant 1	Applicant 2	Applicant 1	Applicant 2
<b>White</b>			<b>Asian or Asian British</b>	
British	<input type="checkbox"/>	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Irish	<input type="checkbox"/>	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
			Other	<input type="checkbox"/>
<b>Mixed</b>			<b>Black or Black British</b>	
White & Black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
White & Black African	<input type="checkbox"/>	<input type="checkbox"/>	African	<input type="checkbox"/>
White & Asian	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>		
			Chinese	<input type="checkbox"/>
			Gypsy/Romany/	<input type="checkbox"/>
			Irish Traveller	<input type="checkbox"/>
			Other ethnic group	<input type="checkbox"/>
			Prefer not to answer	<input type="checkbox"/>
Do you consider you or any member of your household to be disabled? Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>				
(If yes, state why) <input type="text"/>				
Are you or a member of your household a wheelchair user? Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>				
Please supply details: <input type="text"/>				
Is either applicant related to a current or former Committee/Board member or officer of a housing association? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please tell us their name and which housing association <input type="text"/>				
<b>How would you describe your sexuality?</b>	Heterosexual <input type="checkbox"/>		Heterosexual <input type="checkbox"/>	
	Gay or lesbian <input type="checkbox"/>		Gay or lesbian <input type="checkbox"/>	
	Bisexual <input type="checkbox"/>		Bisexual <input type="checkbox"/>	
	Prefer not to answer <input type="checkbox"/>		Prefer not to answer <input type="checkbox"/>	
	Other <input type="checkbox"/>		Other <input type="checkbox"/>	
<b>How would you describe your religion or religious denomination?</b>	Christian <input type="checkbox"/>		Christian <input type="checkbox"/>	
	Buddhist <input type="checkbox"/>		Buddhist <input type="checkbox"/>	
	Muslim <input type="checkbox"/>		Muslim <input type="checkbox"/>	
	Hindu <input type="checkbox"/>		Hindu <input type="checkbox"/>	
	Jewish <input type="checkbox"/>		Jewish <input type="checkbox"/>	
	Sikh <input type="checkbox"/>		Sikh <input type="checkbox"/>	
	Other <input type="checkbox"/>		Other <input type="checkbox"/>	
	No religion <input type="checkbox"/>		No religion <input type="checkbox"/>	
	Prefer not to answer <input type="checkbox"/>		Prefer not to answer <input type="checkbox"/>	

## Where did you hear about us?

### Where did you hear about this service?

Direct mail	<input type="checkbox"/>	Local authority	<input type="checkbox"/>	Radio	<input type="checkbox"/>	Sign boards	<input type="checkbox"/>
Employer	<input type="checkbox"/>	Housing association	<input type="checkbox"/>	Drop-in session	<input type="checkbox"/>	Word of mouth	<input type="checkbox"/>
Exhibition	<input type="checkbox"/>	Newspaper/Magazine	<input type="checkbox"/>	Television	<input type="checkbox"/>	Billboard/Poster	<input type="checkbox"/>
Web site	<input type="checkbox"/>	Estate agent	<input type="checkbox"/>	Financial advisor	<input type="checkbox"/>	Other	<input type="checkbox"/>

Please supply details, e.g What newspaper? Which radio station?

## Thinking more generally, when looking for properties and new developments for sale / rent:

Which local newspaper (s) do you read?

Which property search websites do you visit?

Are there any specific estate agents that you like to visit?

### IMPORTANT INFORMATION PLEASE READ. PLEASE ENSURE THAT YOU SIGN AND DATE THIS FORM BEFORE RETURNING IT

**Moat**, as HomeBuy Agent, will only process the given personal data of all applicants for the purpose of assessing your application for housing and will hold your information in accordance with the Data Protection Act 1998.

We may also share this information for the same purpose with other organisations that handle public funds. The information may be used for statistical surveys, which means we may pass this information in confidence to the Department for Communities and Local Government (DCLG), Homes and Communities Agency (HCA) and agencies working on our and their behalf who may contact you.

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. We, other HomeBuy agents and partner housing associations, reserve the right to take up references relating to applicants as we consider it necessary and may also search the files of any credit reference agency which will keep a record of any such request.

We must protect the public funds we handle and so may use the information you have provided on this form to prevent and detect fraud. Under section 29(3) of the Data Protection Act 1998 the information may be disclosed for purposes of crime prevention and detection. 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.

Signed (Applicant 1)

Date

It is a criminal offence to knowingly or recklessly make a false declaration or withhold information reasonably required in connection with your application.

I/we have read the above and confirm that I/we have provided accurate and up-to-date information relating to my/our application for HomeBuy. I/we understand that if it is found that false information has been given either knowingly or recklessly, appropriate legal action may be taken by the housing association or local authority and/or seek possession of any leasehold tenancy granted.

I/we understand that as a council, housing association or other public sector tenant, I/we will be required to give up my/our rented home on the day of completion if I/we buy or rent a home through any of the housing associations offering homes.

I/we authorise **Moat** to pass information to other HomeBuy agents, partner housing associations, credit reference agencies, local authorities and to estate agents who may be able to assist in locating properties for applicants.

I/we authorise HomeBuy agents or partner housing associations to contact me by telephone, text, email or post.

I/we authorise **Moat** to share information with developers.

I/we authorise **Moat** to share information with Moat's panel of independent mortgage advisors.

Signed (Applicant 2)

Date

Please check you have filled in all sections, otherwise the form will be returned to you.

If you do not wish to receive details of affordable homes that may be of interest to you, please tick this box

Please call our HomeBuy services team on 0845 359 6161 if you need any assistance to complete this form. We are open 9am-5pm Monday to Friday.

This form can be made available in large text. We offer Language Line Services to people whose first language is not English.