

# Shared Ownership Application Form

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Pen at the ready,  
**your new home  
awaits**

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Office use only  
Date received:

# Take a moment to complete this application form and you could be on your way to a new home

We can only consider applications for properties currently available - see [www.hightownhomes.com](http://www.hightownhomes.com)

Please fill in this form using **BLOCK CAPITALS**

Your application form must be fully completed before we can consider it. If you are applying jointly, both applicants must complete this form. This document can be made available in braille or in large print, and is also available on the website where it can easily be viewed in larger print. Please contact us at [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk) to request an alternative version of the document. If you've got any questions, call us on **01442 292535** or email [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk)

## 1 Your personal details

	First Applicant	Second Applicant
Title		
First name(s)		
Middle name(s)		
Surname(s)		
Date of birth		
Current Address		
Postcode		
How long have you lived there? <i>(If you have lived elsewhere in the last 3 years, please list all your previous addresses and dates on page 10)</i>		
Home telephone number		
Mobile telephone number		
Email address		
Which local authority area do you live in?		
Which local authority area do you work in?		
Do you have immediate family (parents, siblings, spouses, children) who live in the local authority area you are applying for?	Yes / No	Yes / No
If yes, please provide their full address		

## 2 Your employment details

	First Applicant	Second Applicant
Job Title / Occupation		
Are you a regular in the Armed Forces? <i>(If yes, please provide proof with your application)</i>	Yes / No	Yes / No
Are you permanently employed?	Yes / No	Yes / No
If yes, do you work full time or part time?		
How long have you been employed by your company?		
If on a probationary period, how long is your probation?		
Are you on a fixed term contract?	Yes / No	Yes / No
If yes, contract start date		
Contract end date		
Employer's name		
Employer's address		
Employer's telephone number		
Are you self-employed?	Yes / No	Yes / No
If yes, give details of your position, company, length of time self employed?		
If self-employed, can you provide at least 3 years' audited accounts?	Yes / No	Yes / No

## 3 Your income, savings and outgoings

	First Applicant	Second Applicant
Gross annual income <i>(excluding overtime / bonus / commission)</i>		
Regular annual overtime / bonus / commission before deductions		
<i>Additional monthly household income:</i>		
Working Tax Credits		
Child Tax Credits		
Disability Allowance		
Guaranteed Maintenance Income		
Other Income (Please state)		
Total savings		
Total gifted money		
Name(s) of person(s) gifting money		

Please give details of all outstanding loans including hire purchase, store card payments and student loans

Loan is in the name of	Purpose of loan / credit agreement	Name of lender	Date of final payment due	Monthly Payments	Total amount outstanding
<b>Total</b>					

Please provide details of all credit cards that are held

Account holder's name	Credit card company	Balance	Monthly payment

	First Applicant	Second Applicant
Do you have any other regular monthly financial commitments (e.g. child maintenance)?	Yes / No	Yes / No
If yes, what are the payments for?		
How much are the payments?		
Date payments to end		
Current rent		

## 4 Statements

If you cannot tick all the boxes, please summarise your circumstances on <a href="#">page 10</a>	First Applicant	Second Applicant
I do not have any active individual voluntary credit agreements in place	<input type="checkbox"/>	<input type="checkbox"/>
I have not had a home repossessed in the last 5 years	<input type="checkbox"/>	<input type="checkbox"/>
I/we have access to / can raise at least £3,000 to cover the costs of buying a home*	<input type="checkbox"/>	<input type="checkbox"/>
I have never failed to keep up payments on any loan or form of credit agreement	<input type="checkbox"/>	<input type="checkbox"/>
I have not been behind with rent / mortgage payments	<input type="checkbox"/>	<input type="checkbox"/>
I have never had a County Court Judgement registered against me**	<input type="checkbox"/>	<input type="checkbox"/>
I have never been declared bankrupt**	<input type="checkbox"/>	<input type="checkbox"/>
I am not currently receiving housing benefits	<input type="checkbox"/>	<input type="checkbox"/>
Have you been employed by Hightown Housing Association within the last 12 months?	Yes / No	Yes / No

Are you closely connected\*\*\* to any employee or Board or Committee member of Hightown Housing Association? Do you, or anybody closely connected to you, have any personal, business or financial relationship with any Board, Committee or staff member of Hightown Housing Association? If so, please give details below. All interests declared will be reviewed by Hightown Housing Association who will consider whether there is any conflict or duality of interest.

Yes / No  If yes, please provide details of the relationship

\*This amount is a guideline figure and will vary. In addition to this amount your mortgage lender will require a minimum 5-10% deposit of the share you purchase.

\*\*If unticked, please provide date when discharged and summarise your circumstances on [page 10](#)

\*\*\* Closely connected includes family members and persons with whom the individual has a close connection. Family member has a wide meaning and would include a partner (married, civil partnership or living together), parent, parent of a partner, son or daughter, stepson or stepdaughter, the child of a partner, brother, sister, brother or sister of a partner, grandparent, grandchild, uncle or aunt, nephew or niece, the partners of any of these people, any dependents, and any person on whom the individual depends. It also includes estranged, separated and divorced family members.

## 5 Where you live now and your requirements

Please tick all that apply to you:	First Applicant	Second Applicant
Council tenant*	<input type="checkbox"/>	<input type="checkbox"/>
Housing association tenant*	<input type="checkbox"/>	<input type="checkbox"/>
Renting privately*	<input type="checkbox"/>	<input type="checkbox"/>
Renting from employer	<input type="checkbox"/>	<input type="checkbox"/>
Living with family or friend	<input type="checkbox"/>	<input type="checkbox"/>
Temporary accommodation	<input type="checkbox"/>	<input type="checkbox"/>
Home owner	<input type="checkbox"/>	<input type="checkbox"/>
* Please give the name, address and telephone number of your landlord		
You must be registered with the local Help to Buy agent	Yes / No	Yes / No
Please register if you have not done so and confirm your registration number here:		
Do you have any pets? (Please note, we currently operate a no pets policy in our apartments)	Yes / No	Yes / No
If yes, please specify		

## Who will be living with you?

Name	Gender	Date of Birth	Relationship to you	Please confirm why this person(s) is not included in the purchase of this property

## 6 Current / previous home owners

If you or the second applicant have ever owned or partly owned a property in the UK or abroad, please complete the relevant option below, and provide the necessary supporting documents.

- A If you are selling your home
- B If you have sold your home
- C If you are in the process of having your name removed from a mortgage
- D If you have had your name removed from a mortgage

### A If you are selling your home

	First Applicant	Second Applicant
Property address		
Property in the name of		

Amount of mortgage outstanding		
Estimated equity (less all fees and loans repaid)		
Are there any arrears or negative equity on the property?	Yes / No	Yes / No
If yes, how much is outstanding and what are your arrangements to repay?		
Do you have a buyer for your home?	Yes / No	Yes / No
Are you selling through an estate agent?	Yes / No	Yes / No
If yes, please provide their name and telephone number		
What is the estimated completion date?		
Is it a shared ownership property?	Yes / No	Yes / No
If yes, what percentage share do you own?		
Please give the name, address and contact details for the housing association		
What is your reason for moving?		

## B If you have sold your home

	First Applicant	Second Applicant
Property address		
Property in the name of		
Date property sale completed		
Equity received (less all fees and loans repaid)		
Evidence of sale must be attached	<input type="checkbox"/>	<input type="checkbox"/>

## C If you are in the process of having your name removed from a mortgage

	First Applicant	Second Applicant
Property address		
Property in the name of		
Transfer date		
Amount to be received from transfer		

## D If you have had your name removed from a mortgage

	First Applicant	Second Applicant
Property address		
Property was in the name of		
Transfer date		
Amount received from transfer		
Evidence of transfer must be attached	<input type="checkbox"/>	<input type="checkbox"/>

If you'd like some assistance completing this section, call us on 01442 292535 or email [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk)

## 7 New property details

Development name		
Property size and type (eg 2 bedroom house)		
Property address		

**If we make a provisional offer we will request further supporting documentation from you**



## 8 Your background information

	First Applicant	Second Applicant
Are you a British or EU / EEA citizen?	Yes / No	Yes / No
If no, is your passport stamped with "indefinite leave to remain"?	Yes / No	Yes / No
If no, when does your leave to remain / work visa end?		

### Equal opportunities

The information in the equalities section is requested to enable Hightown to make sure we treat all applicants fairly. It is also used for statistical returns to Government agencies. All personal data provided is treated in confidence. Providing the information is optional and your application will not be affected if you choose not to provide the information. Please tick one box for each applicant in each section.

Age	1	2	Gender	1	2
18-24	<input type="checkbox"/>	<input type="checkbox"/>	Male	<input type="checkbox"/>	<input type="checkbox"/>
25-34	<input type="checkbox"/>	<input type="checkbox"/>	Female	<input type="checkbox"/>	<input type="checkbox"/>
35-44	<input type="checkbox"/>	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>	<input type="checkbox"/>
45-55	<input type="checkbox"/>	<input type="checkbox"/>	Is your present gender the same as you were assigned at birth?	Yes/No/ Prefer not to say	Yes/No/ Prefer not to say
56-59	<input type="checkbox"/>	<input type="checkbox"/>			
60-64	<input type="checkbox"/>	<input type="checkbox"/>	Sexual orientation	1	2
63-74	<input type="checkbox"/>	<input type="checkbox"/>	Heterosexual	<input type="checkbox"/>	<input type="checkbox"/>
75-84	<input type="checkbox"/>	<input type="checkbox"/>	Gay man	<input type="checkbox"/>	<input type="checkbox"/>
85+	<input type="checkbox"/>	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable	<input type="checkbox"/>	<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	<input type="checkbox"/>
			Other	<input type="checkbox"/>	<input type="checkbox"/>
			Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>
Ethnicity	1	2	Religion	1	2
White	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
British	<input type="checkbox"/>	<input type="checkbox"/>	Christian (all denominations)	<input type="checkbox"/>	<input type="checkbox"/>
Irish	<input type="checkbox"/>	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>	<input type="checkbox"/>
White other (please state):	<input type="checkbox"/>	<input type="checkbox"/>	Hindu	<input type="checkbox"/>	<input type="checkbox"/>
Mixed	<input type="checkbox"/>	<input type="checkbox"/>	Jewish	<input type="checkbox"/>	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>	Muslim	<input type="checkbox"/>	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	<input type="checkbox"/>	Sikh	<input type="checkbox"/>	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	<input type="checkbox"/>	Any other religion	<input type="checkbox"/>	<input type="checkbox"/>
Mixed background other (please state): Asian	<input type="checkbox"/>	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>
Asian or Asian British Indian	<input type="checkbox"/>	<input type="checkbox"/>	Disability	1	2
Asian or Asian British Pakistani	<input type="checkbox"/>	<input type="checkbox"/>	No disability Hearing	<input type="checkbox"/>	<input type="checkbox"/>
Asian or Asian British Bangla-deshi Chinese	<input type="checkbox"/>	<input type="checkbox"/>	Impairment Visual	<input type="checkbox"/>	<input type="checkbox"/>
Asian background other (please state):	<input type="checkbox"/>	<input type="checkbox"/>	Impairment	<input type="checkbox"/>	<input type="checkbox"/>
Black	<input type="checkbox"/>	<input type="checkbox"/>	Wheelchair used out of the home	<input type="checkbox"/>	<input type="checkbox"/>
Black or Black British Caribbean	<input type="checkbox"/>	<input type="checkbox"/>	Wheelchair used in and out of the home	<input type="checkbox"/>	<input type="checkbox"/>
Black or Black British African	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>
Black background other (please state): Gypsy / Traveller	<input type="checkbox"/>	<input type="checkbox"/>			
Any other	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements	1	2
Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
			Braille	<input type="checkbox"/>	<input type="checkbox"/>
			Large print	<input type="checkbox"/>	<input type="checkbox"/>
			Tape	<input type="checkbox"/>	<input type="checkbox"/>

## 9 Declaration

Hightown will only process the personal data provided in accordance with relevant data protection legislation including the General Data Protection Regulation and Data Protection Act 2018, and with Hightown's Data Protection and Privacy Policy and Privacy Notices that are available on the Hightown website.

We must protect the public funds we handle so we may use the information you have provided in this form to detect and prevent fraud. The information may be disclosed for the purposes of crime prevention and detection.

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 shared ownership.

I/we understand that if it is found that false information has been given to obtain housing either knowingly or recklessly, appropriate legal action may be taken.

I/we will notify Hightown of any changes in my/our circumstances relevant to this application.

I/we authorise Hightown to check any information given and take up any references they feel necessary.

I/we authorise Hightown to pass information to independent financial advisors, mortgage lenders, agents and solicitors who may be able to assist with the purchase of a property.

I/we consent to the personal information provided in the Equal Opportunities section being used for purposes stated.

**First applicant signature**

**Second applicant signature**

\_\_\_\_\_

Date

\_\_\_\_\_

Date

Any further information can be supplied here if applicable

**> 1 Previous addresses from the last 3 years**

Address	Dates	Applicant	
		<input type="checkbox"/> First	<input type="checkbox"/> Second
		<input type="checkbox"/> First	<input type="checkbox"/> Second
		<input type="checkbox"/> First	<input type="checkbox"/> Second
		<input type="checkbox"/> First	<input type="checkbox"/> Second
		<input type="checkbox"/> First	<input type="checkbox"/> Second
		<input type="checkbox"/> First	<input type="checkbox"/> Second

**> 4 Explanation of any unticked statements / circumstances**

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**> 11 Additional notes to support your application**

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**That's it! Your application is complete and can be returned to us.**

Please check that you have answered all the questions, enclosed copies of all relevant paperwork and signed the form. If you have any questions please contact our sales department: **T 01442 292535 E [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk)**

**Post to:** Homeownership Team, Hightown Homes, Hightown House, Maylands Avenue, Hemel Hempstead, HP2 4XH

**Email:** [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk)



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Hightown Homes, Hightown House, Maylands Avenue,  
Hemel Hempstead, HP2 4XH

01442 292 535 | [resales@hightownha.org.uk](mailto:resales@hightownha.org.uk)

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Your home may be repossessed if you do not keep up with your repayments on your mortgage or rent/service charge. The value of your home can go down as well as up. We take every care to ensure the correct information is given. We hope you find it useful, however complete accuracy is not guaranteed and the information is expressly excluded from any contract.

*Hightown Homes is a trading name of Hightown Housing Association. We are a charitable housing association operating in Herts, Beds and Bucks, providing a wide range of housing support services for families and single people including people with special needs. Hightown is a charitable association aiming to help people who cannot afford to buy or rent housing at market values.*

*A registered society under the Co-operative and Community Benefit Societies Act 2014 registration number 18077R. Registered under the Housing Act 1996 number L2179.*