

THE EARL OF SOUTHAMPTON TRUST
24 The Square
Titchfield, Hampshire, PO14 4RU
Telephone 01329 513294

Registered Charity No.238549

ALMSHOUSE APPLICATION FORM

1. Details of Applicant

Full Name.....Date of Birth.....

Address.....

.....

.....**Post Code.....**

Telephone Number.....

Marital Status: Married / married but separated / widowed / divorced / single
Single and living with a partner.

Maiden name (if applicable).....

2. Details of spouse or partner (if applicable)

Full Name.....Date of Birth.....

Details of children, or other dependants, who would be living with you:

1).....M/F.....Date of Birth.....

2).....M/F.....Date of Birth.....

(The Trust properties have only one or two bedrooms)

3. Your Occupation:.....

Employers Name & Address.....

.....

.....**Post Code.....**

Telephone Number.....

If unemployed, please state since when.....

4. Details of your Present Accommodation

Do you live in a house / bungalow / flat / lodgings? (delete as applicable)

Do you share it, if so with whom?.....

Do you own your present residence?.....

If not, Name and Address of Landlord.....

.....Tel No.....

(The Trustees reserve the right to obtain a reference from your present landlord)

Number of rooms you occupy.....

Do you share a kitchen?.....Bathroom?.....Other rooms?.....

Are you currently on any Council or Housing Association waiting list?.....

If so, which?.....

5. Other Personal Details

Place of Birth: Self.....

Spouse / partner / dependant.....

Years resident in the Ancient Parish of Titchfield*: Self.....

Spouse /partner / dependant.....

- This includes the present Church of England parishes of Titchfield, Sarisbury Green, Locks Heath, Hook with Warsash, Stubbington and Lee-on-the-Solent.

Please, state when and for how long you have lived in any of these places:

.....

.....

.....

Do you have any family within the area?.....

.....

.....

.....

6. Financial Details

a) What is your total annual income? £.....

Take-home earnings (including Overtime
Commission and Bonuses) £.....per week

Savings and Investments £.....per annum

State Benefits (after deductions) £.....per week

Maintenance £.....per week

Other (please, specify) £.....per.....
.....

b) What is the income of any other earner in your household? Please, state relationship: parent / spouse / partner / sibling:

Take-home earnings (including Overtime
Commission and Bonuses) £.....per week

Income from Savings and Investments £.....per annum

State Benefits (after deductions,as above) £.....per week

Maintenance £.....per week

Other (please, specify) £.....per.....
.....

c) Savings

Please, give the total amount of savings that you or anyone who will be living with you have in any bank, building society, stocks, shares or other investment: £.....

**NB: PROOF OF EARNINGS AND SAVINGS MAY BE REQUIRED
(PAYSLIPS, BANK/BUILDING SOCIETY STATEMENTS ETC)**

d) Outgoings

How many people do you, and anyone else who will be living with you support financially?
(including total maintenance to ex-partners and/or children):

Number of Adults.....Amount: £.....per.....

Number of Children.....Amount: £.....per.....

NB: PROOF MAY BE REQUIRED

7. Ownership of Property

Do you, or anyone else who will be living with you, own any property other than where you live? YES / NO

If so, state the value of the property and the share that any of you have in

It.....

Do you, or your partner, own a car?.....

8. Health and Well-being

It is essential that Almshouse Residents are able to look after themselves.

Please, state if you have any difficulty managing stairs: YES / NO

Would your Next of Kin help in case of illness?.....

Name and Address of Next of Kin (not spouse or partner):.....

.....

Post Code.....Telephone Number.....

9. Details of two referees, one a personal one and the second a responsible contact such as a teacher, doctor, social worker, priest, lawyer or other professional person. Neither referee is to be a member of the applicant's family

a) Name :.....

Relationship(i.e. work colleague, school friend etc.):.....

Address (inc. postcode):.....

.....

Telephone Number:.....

b) Name :.....

Relationship(i.e. work colleague, school friend etc.):.....

Address (inc. Postcode):.....

.....

Telephone Number:.....

10. Confirmation of Statements above

I agree that, if I am appointed to an Almshouse, I will occupy it as a Beneficiary of the Charity as a Licensee of the Trustees and not as a tenant. I also agree that the monthly sum I pay will be regarded as a Maintenance Contribution and not as rent.

I believe the information in this form to be true.

Applicants signature.....Date.....

**Please, return the completed form to:
The Earl of Southampton Trust
24 The Square, Titchfield, Hampshire, PO14 4AF**

By.....

Data Protection: Please, note that personal information is held in the records of the Trust and will be treated as Private and Confidential.