

Brighton & Hove Housing Application Form

This is the housing application form for Brighton & Hove City Council and the housing associations working in the city.

I am:

- a transfer applicant** - a tenant of Brighton & Hove City Council or any one of the housing associations listed and living in Brighton & Hove
- a homeseeker** - anyone else, eg renting privately, living with family or friends, living outside of Brighton & Hove, living in temporary accommodation, or applying for housing for the first time

I am applying for:

- general needs/family housing
- sheltered housing

Sheltered housing is specifically designed for people aged 60 years or over who need the additional support of a scheme manager.

Please read the guidance notes on page three carefully before completing this application.

Checklist

Please ensure you send us copies of all the supporting information we ask for. We cannot process your application without it.

This includes:

- ✓ **Proof of identity** - eg a photocopy of your and your partner's birth certificates, passports, or driving licences
- ✓ **Proof that your children live with you permanently** - eg a DL84TS from the Child Benefit Agency (telephone them on 08453 021 444)
- ✓ **Proof that you live, work or study in the city** - eg a copy of your tenancy agreement, bank statement, utility bill, employment contract or university letter



GUINNESS TRUST GROUP



Brighton & Hove Housing Application

You can use this form to apply for general needs or sheltered housing in Brighton & Hove, whether you are a homeseeker applying for the first time or a transfer applicant.

All the information you give us will be placed on the Brighton & Hove Housing Register database. Brighton & Hove City Council may share this information with housing associations or other social landlords who could help rehouse you. We may also take references from private landlords.

You have a right to see information kept on file about your application and to ask for any inaccurate information to be removed.

We now operate a choice based lettings scheme called **homemove**. Our full Lettings Scheme policy is published and available by calling the homemove team on 293130 or on the council website at www.brighton-hove.gov.uk/homemove.

Under the lettings scheme all applications for housing are assessed and placed in one of four broad bands - A, B, C or D - depending on housing need. Priority is decided first by band, by local connection and by waiting time. You have a local connection if you live in the city, if you have a permanent job in the city, or are in full-time study in the city.

Please note that the demand for housing is far higher than the supply.

homemove – choice based lettings in Brighton & Hove

With choice based lettings schemes, **you have to bid** to tell us which properties you are interested in to find a new home. With the exception of a few emergency priority cases, we no longer directly allocate properties to people on the housing register. You can make your bids through the homemove website, over the phone, by text message or using the special coupons we send you.

We will send you further information about how to use the scheme once your application has been assessed. You can also visit the homemove website at www.homemove.org.uk.

Homeseekers

Anyone over 18 years of age can apply for housing in Brighton & Hove, unless they are subject to immigration control and do not have refugee status or exceptional leave to remain in the UK.

Transfer applicants

A tenant of Brighton & Hove City Council or any one of the housing associations listed on the front and living in Brighton & Hove can apply for a transfer in the city.

Sheltered housing applicants

Anybody over the age of 60 with support needs can apply for sheltered housing.

Exclusions

Brighton & Hove City Council reserves the right not to accept applications from people whose tenancy has previously ended due to rent arrears or anti-social behaviour, such as noise nuisance, domestic violence, racial harassment, intimidation or drug dealing.

If your application is refused because of unacceptable behaviour, you will be told in writing, and this will include the grounds for our decision and details of your right to request a review.

The council will not normally make offers of accommodation to transfer applicants in rent arrears or in breach of any other aspect their tenancy agreements.

Guidance notes – please read these first

General points

- Please complete the form in ink using capital letters.
- Where a yes/no answer is required, please put a tick (✓) in the appropriate box.
- Please read the questions carefully and answer all the questions that apply to you. If you do not fill in the form properly or give us all the information we need, we will need to return it to you and this will delay your application.
- If you are applying for a transfer, please follow the instructions in the form to make sure you answer all the questions that are relevant to you.
- If you need more space for an answer, please use the space provided on page 14 or attach further sheets of paper as necessary.
- Once you are on the register, we will write to you to give you a registration number and the other details that you will need. Please keep the letter you receive in a safe place.
- **Please keep us informed of any change in your circumstances (such as a change of address, or additions to your household, etc), as this may affect your status on the register or your application may be closed. We will write to you annually to see if you wish to remain on the register.**

If you need help to complete this form:

Homeseekers - please contact the homemove Team on: **01273 293130**

Sheltered applicants - please contact the Sheltered Housing Team on: **01273 293255**

Transfer applicants - Brighton & Hove City Council tenants, please contact your local housing office on the numbers listed below. Tenants of the partner Brighton & Hove housing associations, please contact your housing association.

Lavender Street **01273 293260**

Manor Place **01273 293200**

Oxford Street **01273 293230**

Selsfield Drive **01273 293171**

Victoria Road **01273 293377**

Declaration

Please read the declaration at the end of this form carefully and then sign it. If it is a joint application, both applicants need to sign. The form should then be sent to the homemove Team at the address given on page 15. Please ensure that you have included copies of all the relevant supporting information we have asked for.

Data Protection Act 1998

All the information you give on this form will be placed on the Brighton & Hove Housing Register. You have a right to see information kept on file about your application and to ask for any inaccurate information to be removed.

1 About you and your household

If you have a partner, both you and your partner must give your surnames and first names, and both sign this form.

	Applicant	Partner
Surname	<input type="text"/>	<input type="text"/>
Maiden name	<input type="text"/>	<input type="text"/>
First names	<input type="text"/>	<input type="text"/>

Telephone numbers

Home	<input type="text"/>	<input type="text"/>
Work (<i>if convenient</i>)	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>
E-mail	<input type="text"/>	<input type="text"/>

1.1 If you are applying with a partner, we will treat it as a joint application - meaning that any tenancy we grant will be joint - unless you tell us otherwise. If you **do not** want a joint tenancy, please tick this box

1.2 Household details

Please give your details and the details of everyone in your household who will be rehoused with you. **Please give your own details first.**

Surname	First names	Mr/Mrs Ms/Miss	Male/ Female	Date of birth	Relationship to applicant
					APPLICANT

If necessary, please use the space provided on page 14 to continue

2 Applicants not living with you

Please list below the names of people who do not currently live in your home but who you would like to be rehoused with you.

Please note that this does not mean that we can automatically accept the applicants you name.

Surname	First names	Male/Female	Date of birth	Relationship to you

Please give the reason why you would like these applicants to be rehoused with you and their current address

3 Your address

Applicant's present address

Postcode

Date moved in ___/___/___ Reason for wanting to leave

3.1 Are you currently housed in temporary accommodation provided through Brighton & Hove City Council? **Yes** **No**

3.2 Please tick the appropriate box below to show your current housing situation.

Housing association tenant Council tenant Owner
Private rented Living with family/friends Other _____

In tied accommodation (please complete the section below)

Is tied accommodation due to end? **Yes** **No** If **yes**, when?

3.3 If you currently have a tenancy for any other council or housing association property, please give us details of who you hold the tenancy with.

» » Transfer applicants please go to question 5

3.4 If you are currently renting your home, please give us your landlord's name and address.

Postcode Telephone number (including code)

3.5 If you do not have an address to register from, please let us know where you usually sleep.

3.6 We will write to you at your present address. If you do not want us to write to you here, or do not have an address to register from, please provide an address where we can write to you.

3.7 What is your connection to the city?

- Living here.
- You have permanent job (part or full-time) in Brighton & Hove - please note that this cannot be a temporary or fixed-term position, or be unpaid. Please give details and provide proof.

- You are in full-time study in Brighton & Hove. Please give details and provide proof.

- No connection.

4 Housing Act 1996 Section S161–162

If you are subject to immigration control, we may not be able to accept your application.

Are you subject to immigration control? Yes No

If yes, you will need to provide us with a **copy of your status papers**. We will only be able to accept your application if:

- you have refugee status, or
- you have been granted exceptional leave to remain and are not subject to a 'no recourse to public funds condition', or
- you have been granted indefinite leave to enter or remain, not subject to any limitation or condition (settled status), unless you have obtained leave on the basis of a sponsorship undertaking and have been resident in the UK for less than five years (unless your sponsor has died).
- you provide your worker registration card or proof of employment if you are a citizen from an A8 country

5 Your present accommodation

What kind of accommodation are you living in?

Bungalow House Maisonette Flat
 Studio flat Hostel Bed & Breakfast

How many bedrooms are there in your current property?

How many bedrooms do you and the other people on the application have for your **sole use**?

None Studio flat 1 2 3 4 4+

5.1 Do you have access to any of the following facilities?

	Tick if you have access to them	Tick if you share them
Living room	<input type="checkbox"/>	<input type="checkbox"/>
Toilet	<input type="checkbox"/>	<input type="checkbox"/>
Bath or shower room	<input type="checkbox"/>	<input type="checkbox"/>
Hot water supply	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen and cooking facilities	<input type="checkbox"/>	<input type="checkbox"/>
Electricity supply	<input type="checkbox"/>	<input type="checkbox"/>

5.2 If you share facilities, please say who you share them with and how they are related to you.

Name of the person you share facilities with	Relationship to you

6 Bedrooms in your present accommodation

Please state who uses each bedroom (M = Male, F = Female).

	Age 1st person	M/F	Age 2nd person	M/F	Age 3rd person	M/F	Age 4th person	M/F
Studio flat								
Bedroom 1								
Bedroom 2								
Bedroom 3								
Bedroom 4								
Bedroom 5								

7 Previous addresses

Have you ever had action taken against you for breach of tenancy, such as a Notice of Seeking Possession, Notice to Quit, injunction or Anti-Social Behaviour Order? **Yes** **No**

If yes, please give the date and details below.

7.1 Please give details of the addresses you and your partner have lived at during the past five years. Start with the address you lived in before your current home and work back.

You	Your partner
Previous address 1 _____ _____ Lived there from _____ to _____ Reason for leaving _____ Name, address and telephone no. of landlord _____ _____ _____ Was landlord a local authority or housing association? Yes <input type="checkbox"/> No <input type="checkbox"/>	Previous address 1 _____ _____ Lived there from _____ to _____ Reason for leaving _____ Name, address and telephone no. of landlord _____ _____ _____ Was landlord a local authority or housing association? Yes <input type="checkbox"/> No <input type="checkbox"/>
Previous address 2 _____ _____ Lived there from _____ to _____ Reason for leaving _____ Name, address and telephone no. of landlord _____ _____ _____ Was the landlord a local authority or housing association? Yes <input type="checkbox"/> No <input type="checkbox"/>	Previous address 2 _____ _____ Lived there from _____ to _____ Reason for leaving _____ Name, address and telephone no. of landlord _____ _____ _____ Was the landlord a local authority or housing association? Yes <input type="checkbox"/> No <input type="checkbox"/>

If necessary, please use the space provided on page 14 to continue

▶▶ Transfer applicants please go to question 9

8 Repairs

Is your home in a poor state of repair? Yes No

If **yes**, please tick one or more of these boxes and put more details in the box below.

Leaking roof Damp Rotting woodwork
Structural problems Dangerous floor Faulty wiring
Pest infestation Communal areas in poor condition Other, please state below

Does your landlord know about these problems? Yes No

Have you informed the council's Private Sector Housing Environmental Health Officers about the problem? Yes No

If **no**, do you want the Environmental Health Officers to be told? Yes No

If you ticked **no** to this last question, we will not be able to assess your priority in this category.

If you ticked **yes**, we will contact Private Sector Housing's Environmental Health team and they will visit you to assess the degree of disrepair. You should be aware that the Environmental Health Officers may contact your landlord about the disrepair.

9 Rent history

Do you have any outstanding rent arrears from either your current tenancy or a previous one?

Yes No If **yes**, please state the amount of arrears and address of property concerned.

£	

9.1 Have you ever been served with a Notice to Quit or Notice of Seeking Possession on your home because of rent arrears? Yes No

If **yes**, please give the address of the property concerned and the date of the notice.

9.2 Have you or anyone on the application ever received help from the council as an accepted homeless applicant, in paying a damage deposit or rent in advance, or by providing a guarantee so that you could rent a property privately? Yes No

If **yes**, please give the name of the person we gave the deposit, rent or guarantee to.

The address for which we supplied the deposit, rent or guarantee to.

The date we gave the deposit/rent/guarantee

The amount of the deposit/rent/guarantee

£	
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10 Financial information

Please answer the following questions about your financial situation. Complete section A with your own details and section B with your partner's details.

A. You

Are you working? Yes No

If yes, are you? Full-time Part-time

Are you a student? Yes No

What is your annual income?

under£10,000 £30,001-£35,000

£10,001-£15,000 £35,001-£40,000

£15,001-£20,000 £40,001-£50,000

£20,001-£25,000 over £50,000

£25,001-£30,000

Your National Insurance number?

If employed, please give us the name and address of your employer, and your job title.

B. Your partner

Is your partner working? Yes No

If yes, are they? Full-time Part-time

Are they a student? Yes No

What is your annual income?

under£10,000 £30,001-£35,000

£10,001-£15,000 £35,001-£40,000

£15,001-£20,000 £40,001-£50,000

£20,001-£25,000 over £50,000

£25,001-£30,000

Your partner's National Insurance number?

If employed, please give us the name and address of their employer, and their job title.

11 Owner occupation

Do you or anyone moving with you own the property you are currently living in?

Yes No

Do you or anyone moving with you own a property that you are not currently living in?

Yes No

Please give the following details about the property you own.

Estate agent's valuation of your property £ Mortgage outstanding £

Number of years left on the mortgage Your savings £

Please include copies of an up-to-date estate agent's valuation and a mortgage statement with your application. If major repairs are needed to your property, please enclose a building or surveyor's report.

12 Savings

Do you have any savings? Yes No

If yes, please state amount £

Does your partner have any savings? Yes No

If yes, please state amount £

13 Benefits

Do you or your partner receive any benefits? **Yes** **No** If **yes**, please tell us which ones.

You	Your partner
Income Support <input type="checkbox"/>	Income Support <input type="checkbox"/>
Child Benefit <input type="checkbox"/>	Child Benefit <input type="checkbox"/>
Jobseekers Allowance <input type="checkbox"/>	Jobseekers Allowance <input type="checkbox"/>
Incapacity Benefit <input type="checkbox"/>	Incapacity Benefit <input type="checkbox"/>
Disability Living Allowance <input type="checkbox"/>	Disability Living Allowance <input type="checkbox"/>
Carers' Allowance <input type="checkbox"/>	Carers' Allowance <input type="checkbox"/>
Other - please give details below	Other - please give details below
<input type="text"/>	<input type="text"/>

14 Receiving and giving support

CareFirst/NHS Number

If you have had an Adult Social Care or NHS assessment, please give the name, address and telephone number of your Care Co-ordinator below. If you have your 'Person Held Record' (the yellow file), this should include these details.

▶▶ If you've named your Care Co-ordinator above, please go directly to question 14.2

14.1 Receiving support

Do you or anyone on the application need support for any of the following reasons?

You can tick more than one box.

Mental health problems <input type="checkbox"/>	Drug/alcohol misuse <input type="checkbox"/>	Domestic violence <input type="checkbox"/>
HIV/AIDS <input type="checkbox"/>	Learning disabilities <input type="checkbox"/>	Physical disabilities <input type="checkbox"/>
Sensory disabilities <input type="checkbox"/>	Young person <input type="checkbox"/>	Leaving care <input type="checkbox"/>
Refugee <input type="checkbox"/>	Other (please state) <input type="text"/>	

Do you or anyone on the application receive any of the following support?

You can tick more than one box.

Social Worker <input type="checkbox"/>	Health Visitor <input type="checkbox"/>	Community Psychiatric Nurse <input type="checkbox"/>
Occupational Therapist <input type="checkbox"/>	Support/resettlement worker <input type="checkbox"/>	Special Needs Housing Officer <input type="checkbox"/>
Probation Service <input type="checkbox"/>	Other (please state) <input type="text"/>	

Please give the name, address and phone numbers of all the support you have ticked.

14.2 Giving support

Do you or anyone on the application need to give support to someone else? **Yes** **No**

If yes, please provide the name, address and relationship to the person who receives your support and the reason you need to support them (please provide supporting documentation/information).

15 Accessibility

Do you or a member of your household have any mobility or sensory requirements? Yes No

Please tell us if your property has any disabled adaptations?

Do you need any of the following facilities?

Wheelchair accommodation	<input type="checkbox"/>	Adaptations	<input type="checkbox"/>
Level access	<input type="checkbox"/>	Downstairs toilet	<input type="checkbox"/>
Ground floor accommodation	<input type="checkbox"/>		

Do you think that you would be able to stay in your own home if you received extra care and support (for example a home help, community alarm, equipment or adaptations)?

Yes No

If **yes**, please give details of the sort of support you think you would need.

16 Medical circumstances

Is your current accommodation affecting your health or the health of a member of your household (your household only consists of family members due to move with you)?

Yes No

If yes, we will send you a **'Self Assessment Medical Form'** which you will need to fill in. The information you give on this form will help the council's medical advisor to assess your priority for rehousing.

There is no need to contact your doctor when completing the form as our medical advisor will do this if necessary.

You will need to complete a separate medical form for each person in your household whose health is affected by your accommodation.

If you require more than one form, please tell us how many you need

17 Pets

Do you have any pets that you would want to bring with you? Yes No

If yes, please give details.

18 Shared ownership

If you are interested in shared ownership (part rent/part buy), please contact **Moat on 07002 662846** or visit their website www.homebuy.co.uk for more information.

19 Criminal convictions

Have you or a member of your household been convicted of any criminal offence?

Yes No

If **yes**, please provide details.

20 Disclosure

Are you or any member of your household related to a Brighton & Hove City Council employee or councillor, or an employee or committee member of any housing association working in the city? Yes No

If **yes**, please state their name and their relationship to you.

21 Next of kin

Please also give us details of your next of kin.

Name

Address

Telephone number

22 Equal opportunities

The council has policies to ensure that everyone who applies for housing is provided with a service that is relevant to their needs. To provide a housing service that is accessible to all applicants, the service must be monitored to ensure it is provided fairly. By giving the following information, you will help us to make sure that these policies are working properly.

It is important that you complete this section but we realise that some people may be unwilling to give details of their religion or sexuality - therefore sections B and C are optional.

Section A – Ethnicity

Applicant

Partner/Joint Applicant

White

- | | | |
|-------------------------------|--------------------------|--------------------------|
| 1. British | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Irish | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Any other White background | <input type="checkbox"/> | <input type="checkbox"/> |

Mixed parentage or heritage

- | | | |
|-------------------------------|--------------------------|--------------------------|
| 4. White and Black Caribbean | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. White and Black African | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. White and Black Asian | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Any other mixed background | <input type="checkbox"/> | <input type="checkbox"/> |

Asian or Asian British

- | | | |
|--------------------------------|--------------------------|--------------------------|
| 8. Indian | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Pakistani | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Bangladeshi | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Any other Asian background | <input type="checkbox"/> | <input type="checkbox"/> |

Black or Black British

- | | | |
|--------------------------------|--------------------------|--------------------------|
| 12. Caribbean | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. African | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Any other Black background | <input type="checkbox"/> | <input type="checkbox"/> |

Chinese or other ethnic group

- | | | |
|----------------------------|--------------------------|--------------------------|
| 15. Chinese | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Any other ethnic group | <input type="checkbox"/> | <input type="checkbox"/> |

Section B – Religion (this section is optional)

- | | | |
|-------------|--------------------------|--------------------------|
| Buddhist | <input type="checkbox"/> | <input type="checkbox"/> |
| Christian | <input type="checkbox"/> | <input type="checkbox"/> |
| Hindu | <input type="checkbox"/> | <input type="checkbox"/> |
| Jewish | <input type="checkbox"/> | <input type="checkbox"/> |
| Muslim | <input type="checkbox"/> | <input type="checkbox"/> |
| Sikh | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | <input type="checkbox"/> |
| No religion | <input type="checkbox"/> | <input type="checkbox"/> |

Section C – Sexuality (this section is optional)

- | | | |
|--------------|--------------------------|--------------------------|
| Bisexual | <input type="checkbox"/> | <input type="checkbox"/> |
| Gay | <input type="checkbox"/> | <input type="checkbox"/> |
| Heterosexual | <input type="checkbox"/> | <input type="checkbox"/> |
| Lesbian | <input type="checkbox"/> | <input type="checkbox"/> |
| Transgender | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | <input type="checkbox"/> |

All lettings to council accommodation and nominations to housing associations from the Housing Register will be made according to housing need, regardless of ethnic origin, marital status, race, gender or sexuality.

Please use this space to give any extra information we have asked for on this form, such as previous addresses, etc.

Checklist

Please remember to ensure you send us copies of all the supporting information we ask for. We cannot process your application without it.

This includes:

- ✓ **Proof of identity** - eg a photocopy of your and your partner's birth certificates, passports, or driving licences
- ✓ **Proof that your children live with you permanently** - eg a DL84TS from the Child Benefit Agency (telephone them on 08453 021 444)
- ✓ **Proof that you live, work or study in the city** - eg a copy of your tenancy agreement, bank statement, utility bill, employment contract or university letter

Thank you for completing this form

Once you have read and signed the declaration below, please return the form to:

homemove Team
4th Floor, Bartholomew House
Bartholomew Square, Brighton BN1 1JP
Tel: 01273 293130

We will write to you as soon as we've assessed your application - you do not need to contact us before then.

Once your application is assessed, we will write to you to tell you what your priority band is, your registration date and your homemove number. We will also send you a registration pack including a copy of the scheme user guide giving you detailed instructions about the scheme and how it works.

You must keep the homemove Team informed of any changes to your household, medical condition or housing situation. This is very important as it could result in a change of your band or your eligibility for certain homes.

Please read the declaration below and then sign at the bottom

The details I have given on this form are true and correct. I will inform Brighton & Hove City Council if any of these details change. I understand that any changes may alter my entitlement to housing.

I agree that any agency I have ticked in Question 14 'Receiving and giving support' may be contacted.

I understand that the organisations who may be in a position to offer me housing may check the details on this form and that the council may also share the information with other agencies who manage public funds. I agree that any relevant information may be given to these organisations to help them consider my case. I also agree that my file will be passed to these organisations if I am to be rehoused by them. I also understand that references may be obtained from private sector landlords.

I agree that Brighton & Hove City Council can contact all the organisations where I have held previous council or housing association tenancies to check details.

I understand that my application may be cancelled if I give false or misleading information, or if I withhold information. If I am granted a tenancy because I have given false or misleading information, or because of information I have not given, I understand that my tenancy may be terminated and I may have to pay a fine of up to £5,000 under Section 171 of the 1996 Housing Act.

I agree that the details given on this form can be used in the decision about any homeless application I may make under Part VII of the 1996 Housing Act. I understand that if I make a false statement, withhold information or fail to tell you if my circumstances change, it is an offence and I may be subject to a fine of up to £5,000 under Section 214 of the 1996 Housing Act.

Applicant's signature _____ Date _____

Joint applicant's signature _____ Date _____

If this form has been completed by anyone other than the main applicant, please give details below.

Completed by _____ (print) Signed _____

Relationship to main applicant _____

We can provide you with an interpreter to help you complete this housing application form. If you need an interpreter, tick the appropriate box and take this form to the citydirect Centre in Bartholomew Square, Brighton and we will make an appointment for you. This will usually take a week to arrange.

يمكننا توفير مترجم لك لمساعدتك على ملء هذه الاستمارة لطلب السكن. إن كنت بحاجة إلى مترجم لغة عربية، الرجاء وضع علامة ✓ في هذا الصندوق واخذ هذه الاستمارة إلى مركز سيتي دايريك (citydirect centre) على العنوان التالي: Bartholomew Square, Brighton. ترتيب الميعاد مدة أسبوع. عادة، يستغرق ترتيب الميعاد مدة أسبوع.

Arabic

এই হাউজিং অ্যাপ্লিকেশন ফর্ম পূরণ করার জন্য আপনার কোন দোভাষীর প্রয়োজন হলে আমরা সে ব্যাপারে আপনাকে সাহায্য করতে পারি। আপনার যদি বাংলাদেশী ভাষায় কোন ইন্টারপ্রেটারের প্রয়োজন হয় তাহলে এই বাক্সে টিক দিন এবং বার্থলোমিউ স্কোয়ার, ব্রাইটন-এ অবস্থিত সিটিডাইরেক্ট সেন্টারে নিয়ে যান। আমরা আপনার জন্য একটা অ্যাপয়েন্টম্যান্টের বন্দোবস্ত করবো। এই আয়োজন করতে সাধারণতঃ এক সপ্তাহ সময় লাগে।

Bengali

我們可以提供傳譯員協助你填寫這份房屋申請表。如果你需要一位廣東話傳譯員，請在這格內加剔，及把這表格交到布萊頓市的巴芙路苗廣場 Bartholomew Square 內的「城市指導中心」 citydirect centre，我們會為你安排預約，一般需時一星期。

Cantonese

ما می توانیم برای شما مترجم فراهم کنیم که به شما زمینه مورد پر کردن فرم درخواست مسکن کمک کند. اگر شما به مترجم فارسی نیازمندید، خواهشمندیم شکل مربع را علامت زده و این فرم را به citydirect centre واقع در Bartholomew Square, Brighton ببریید و ما وقت ملاقاتی برای شما تعیین خواهیم کرد. این کار معمولاً یک هفته به طول خواهد انجامید.

Farsi

Nous pouvons vous procurer un interprète qui vous aidera à compléter ce formulaire de demande de logement. Si vous souhaitez un interprète francophone, veuillez cocher cette case et remettre ce formulaire au centre Citydirect situé à Bartholomew Square, à Brighton, et nous organiserons un rendez-vous pour vous. Cette démarche prend habituellement une semaine.

French

我们可以提供传译员帮助你填写这份房屋申请表。如果你需要一位普通话传译员，请在这格内划钩，及把表格交到布萊頓市的巴夫勞貿廣場 Bartholomew Square 內的「城市指導中心」 citydirect centre，我們會為你安排預約，一般需時一星期。

Mandarin

W razie potrzeby zapewniemy pomoc tłumacza w wypełnianiu niniejszego podania o przydział mieszkania. Jeśli wymagana jest obecność polskiego tłumacza, należy wpisać znak „✓” w tej rubryce i zanieść niniejszy formularz do City Direct Centre mieszczącego się na Bartholomew Square w Brighton. Następnie wyznacza się spotkanie z tłumaczem, na które zwykle trzeba czekać tydzień czasu.

Polish

No caso de ter necessidade de assistência para completar este 'housing application form' (Formulário para Arrendamento de Habitação Social), podemos facultar-lhe os serviços de um(a) intérprete. Caso necessite de um(a) intérprete da língua portuguesa, assinale por favor o respectivo quadrado, devendo levar este impresso para o 'citydirect centre', que se situa no Bartholomew Square em Brighton, sendo posteriormente marcado uma sessão. Geralmente, a mesma é designada dentro do período de uma semana.

Portuguese

Bu Konut Başvuru Formunu doldurmakta size yardımcı olabilecek bir tercüman ayarlayabiliriz. Türkçe tercümana ihtiyacınız varsa, lütfen bu kutuyu işaretleyip, Brighton'da Bartholomew Square de bulunan City Direct Centre'e götürünüz. Bizde size bir randevu yaparız, bu işlem normalinde bir hafta kadar sürebilir.

Turkish

This form can also be made available in large print

