

Gypsy and Traveller Assessment Form (Part 1)

Metz Bridge Court Gypsy & Traveller Site Riverside Park Road TS2 1NL

For office use only	Officer:
Family Name:	
Received Date:	

2EK	SONAL DETAILS						
	Title:	☐ Mr	☐ Mrs	☐ Miss	☐ Ms	Other:	
	Full Name:						
	Have you known by another name? If so please state:						
	Date of birth:						
·	National Insurance number:						
	Address:						
	Postcode:						
	Temporary address (if applicable)	<u> </u>					
	. , ,						
			Pos	stcode:			
	Daytime telephone no:						
	Evening telephone no:						
	Mobile telephone no:						
	Email address:						
PER	SONAL DETAILS OF SPOUSE	/PARTNE	R				
PER	SONAL DETAILS OF SPOUSE Title:	/PARTNE	R	☐ Miss	☐Ms	Other:	
PER				☐ Miss	☐ Ms	Other:	
PER	Title:			Miss	☐ Ms	Other:	
PER	Title: Full Name: Have you known by another			Miss	☐ Ms	Other:	
PER:	Title: Full Name: Have you known by another name? If so please state:			Miss	☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth:			Miss	☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number:			Miss	☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number:		☐ Mrs		☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number: Address:	☐ Mr	☐ Mrs	☐ Miss	☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number:	☐ Mr	☐ Mrs		☐ Ms	Other:	
PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number: Address:	☐ Mr	☐ Mrs		☐ Ms	Other:	
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PER	Title: Full Name: Have you known by another name? If so please state: Date of birth: National Insurance number: Address: Temporary address (if applicable) Daytime telephone no:	☐ Mr	Pos	stcode:	☐ Ms	Other:	

FAMI	FAMILY DETAILS (please provide details of people who normally reside with you)							
Title:	First Name:	Family Name:	Date of Birth:	NI number:	Relationship to you:			
	Is any member of	your household pregnant?			☐ Yes ☐ No			
	If yes, please stat	e who:						
	What is the expec	ted date of birth:						
	Do you have any	pets?			☐ Yes ☐ No			
		us the type of pet/s and how m	any:					
	Do you have any	livestock (horses)?			☐ Yes ☐ No			
	Please be aware	that livestock is prohibited f	rom being kep	t on an occup	ants pitch			
	Have you or anyone moving with you ever had any action taken against you due Yes No to anti social behaviour?							
	If yes, please tell	us who and the reason for this	including the da	ate and type of	action taken:			
	Do you or anyone moving with you have any outstanding criminal charges or has Yes No							
	any previous police action been taken?							
	If yes, please tell us who and the reason for this including the date and type of action taken:							
	Have you or anyo	ne moving with you ever been	convicted or a	criminal offenc	e?			
	If yes, please tell us who and the reason for this including the date of conviction:							

YOUF	R CURRENT ACCOM	IOMN	DATION							
	How long have you lived in your current accommodation?									
	Date from: Date to:									
	What type of accom	of accommodation do you live in?								
	House		Bungalow			Cara	van		Hos	spital
	Flat		Maisonette			Arme	ed Forces		Pris	son
	Bedsit/Studio		Hostel/B&B			Othe	r: (Please s	tate)		
	What type of tenure	do yo	ou have?							
	Owner/Leaseholder		Private tena	nt		Licer	nce/B&B		Tie	d \Box
	Housing association		Name of ass	sociation:						
	Council tenant		Name of loc	al authori	ity:					
	Living with family		Please state	e who and	d pro	vide (contact deta	nils:		
	Have you been aske	ed to l	eave vour cu	irrent acc	omr	nodat	ion?			☐ Yes ☐ No
	If yes, by what date		oavo your oc	arrorn doc	, CIIII	noda				
	Has the landlord app		or a court or	der?:						☐ Yes ☐ No
PRE	/IOUS ADDRESSE	S - p	olease list a	all addre	sse	s yo	u have live	ed at ove	er t	he last five years
Addre	ess:	Type acco	of mmodation:	Dates you at this ac (from DD/MM/Y YYYY):	ddre	SS	Landlords address ar number:		t	Reason for leaving:

	NER/SPOUS the last five y	E PREVIOUS ADDR rears	ESSES - please	list all add	resses yo	ou have live	ed at
Addres		Type of accommodation:	Dates you lived at this address (from DD/MM/YYYY to DD/MM/YYYY):	Landlords i address an number:		Reason for leaving:	
Your	orevious home	es:					
					Main applicant		/Partner
				Yes	No	Yes	No
	Are there any rent arrears, rechargeable repairs or other housing related debts owed from your current or previous homes in the last five years?						
	Have you had a property repossessed in the last 5 years because you were not able to meet mortgage payments?						
	Do you have a	any current mortgage a	rrears?				
'	Have you been	n evicted from a tenand	cy?				
	Have you ever	r been made bankrupt?	•				
	If you have an	swered yes to any of th	ne questions above	, please pro	vide details	3:	
EARN	INGS						
		Employers name	Employers address	s \$elf emplo	yed Weel	kly hours worl	ked
Main a	applicant						
Spouse/Partner							
None dependents					6		

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dent grant/loan	Т		Τ	
	1			
ucational maintenance allowance	1		1	
intenance payments received	1		1	
other income (please specify)			1	
TAL INCOME				

Please use the space below to provide any further information you think we need to know:

DECLARATION OF APPLICANT

The information supplied on this form will be held on computer.

I have read/had read to me the declaration below: and,

I/we agree that Middlesbrough Council may make enquiries on my/our behalf and authorise you to release any information requested by the Council that may be held under the Data Protection Act 1998.

I/we authorise Middlesbrough Council to make such enquiries of other agencies as are thought necessary in connection with any of the information given by me/us.

I/we understand that relevant agencies may include, but are not limited to, any police force, previous landlords, probation service, any other service identified on this form and other council departments. I/we understand that enquiries will be made concerning my character and conduct of any previous tenancies or occupations of any property.

I/we understand that the council reserves the right to suspend, remove or exclude from any scheme or service within the Housing Service, if information received or held by Middlesbrough Council indicates that I/we may not make a suitable tenant in accordance with current legislation. I/we declare that the information contained in this application is true and correct to the best of my/our knowledge. I/we understand that I/we may lose any pitch offered or let to me/us if it is subsequently found that false information has been given

I/we understand that the information recorded on this form will be retained by the Council for a period of five years and used to inform assessments of unmet need for pitches.

Applicant/owner:	Date:
(print name)	
Signature:	
Spouse/Partner:	Date:
(print name)	
Signature:	
Please return this form and any supporting documentation to:	
Community Safety	
Newport Settlement Community Hub St. Paul's Road	
Middlesbrough	
TS1 5NQ	