

West Lothian Housing Register

Name change or addition to application

(Please ensure that you fully complete this form to allow your application to be updated)

Name: **Reference no:**

Former Name:

Address:

Post Code:

Tel No:

email Address:

Addition/Removal (please indicate) to your application e.g. partner, child, or other

* If joint application a mandate must be provided

Name:

Date of birth: **Relationship to applicant:**

Address:

Name:

Date of birth: **Relationship to applicant:**

Address:

Please give details of their most recent address(es) that they have lived at over the last 3 years

(this section must be completed)

Name	Address	Start date	End date	Name & address of Landlord/Lender (if applicable)
<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"/>

Please Turn Over

a partnership between...



What type of property do you live in?

(tick the relevant box)

House Maisonette Sheltered Accommodation
 4 in a block Flat Mobile home/caravan
 Other (please describe)

How many bedrooms are at your address?

(tick the relevant box)

One Two Three Four Five Bedsit

If your home is not a house or caravan, what floor is your home on?

(tick the relevant box)

Ground First Second Third Above Third

How many people reside at your current address including your family?

Who sleeps where and relationship to applicant

Number of couples	<input type="checkbox"/>	Bedroom 1
Number of single males (over 8)	<input type="checkbox"/>	Bedroom 2
Number of single females (over 8)	<input type="checkbox"/>	Bedroom 3
Number of children (under 8)	<input type="checkbox"/>	Bedroom 4
Not applicable	<input type="checkbox"/>	Bedroom 5

Signed Date

Signed Date
(joint applicant)

** If joint applicant has been added ensure mandate is attached*

For Office Use

Checked By Date.....

Input By Date.....