

Allocations Out-with Edinburgh Procedure

Procedure Reference:		HM01a	
Related Policy:		HM01	
Effective date:	November 2019	Review date:	November 2022
Approved by P&PRG:		November 2019	
Owner:	Fiona Ross	Job Title:	Head of Housing Services
To be issued to:		ARK Management All Housing Management Staff All Care & Support Managers All Area Managers	
Method of Delivery:		Email Policy	

Version Control

Date	Owner	Version	Reason for Change
Nov 2019	Head of Housing Services	V3.0	Updated to bring in line with Allocation Policy which was approved in September 2019

Summary of Changes

Section	Change
3.5	Additional information about supported housing referrals
Appendices	Attached to end of procedure

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1.0 Introduction

This procedure supports our Allocations Policy HM01 and details our arrangements for processing applications and approving allocations for all properties except those in the City of Edinburgh (procedure ref: HM22).

For details of the computer processes involved in the applications and allocations procedure, refer to the Capita User Notes or Capita “How to” notes.

2.0 Processing Applications

To apply for a property outside Edinburgh an applicant must complete our Housing Application Form (Appendix 1). Forms may be obtained by:

- a) Contacting one of ARK’s Housing offices;
- b) Downloading and printing a form from our website.

An applicant contacting our office will be sent an application pack comprising:

- Covering letter (Appendix 1);
- Housing Application Form, Fair Processing Notice, Equality Monitoring Form and Application Booklet.

An applicant accessing the website will be able to print off the Application Form, the Application Booklet, the Fair Processing Notice, the Equality Monitoring Form and a copy of the Allocations Policy.

2.1 Recording & reviewing the application

Each application form will be date stamped by the person opening the mail at Reception.

The form will then be passed to the Housing Services Assistant (HSA) who will check the Application Form. If there is any missing information the HSA will contact the applicant by phone, email or letter to obtain any missing details and/or clarify any queries regarding the information provided. The dates received and processed will be completed on the Pointing Sheet to ensure we can manage/report our processing targets as detailed in Appendix 2.

If the applicant does not provide the information/answers required within 7 days of being contacted and we are unable to do a full assessment, the HSA will be unable to place the applicant on the Housing List and it will be kept for a period of 3 months and thereafter destroyed. Any reason for NOT processing the application will be clearly detailed on the Pointing Sheet.

2.2 Pointing an Application

The Housing Application database will allocate a unique application reference number which the HSA will enter on the front sheet of the Application Form.

The HSA will complete a pointing sheet (Appendix 2) using the pointing guidance (Appendix 3) to produce provisional points total and will then:

- Pass the application and any related background information to a Housing Services Officer (HSO);
- The HSO will carry out a second pointing exercise which will either confirm the provisional total or amend it;
- Where required the HSO will discuss any proposed alteration to the points allocated with the HSA, who may make further enquiries with the applicant;
- The points will be entered on the database.

Following completion of the pointing exercise the HSA will write to the applicant (Appendix 4) to give details of the points allocated with a breakdown of the total. The letter will advise that if the applicant is not satisfied they may appeal, and will also advise them to let us know immediately of any changes in circumstances.

The HSA will not save a copy of the letter on the system but will add a copy to the Application Form. This will then be filed in the Applications Cabinet.

2.3 Change of Circumstances

If an applicant reports a change of circumstances, depending on whether the change may have a material change on the points awarded, the HSA will **either**:

- Where no re-pointing is required, note the details with the application form and update the Application Diary on the database;

OR

- If re-pointing is required, a new Application Form will be sent, and following receipt of this carry out the re-pointing exercise.

3.0 Allocating a Tenancy

The process to identify a new tenant will start following receipt of Notice of Termination of Tenancy, following repossession of a property as a result of abandonment or eviction or where we have new properties to allocate.

The HSA will enter the relevant area, house type and number of bedrooms into the Allocations database to produce a report listing suitable applicants in descending order according to the number of points allocated.

3.1 Allocation From housing list

The HSA will write to the top 3 or 4 applicants on the list (Appendix 5) advising that they have been shortlisted for a property. The letter will advise that:

- The HSO wishes to carry out a Pre-Allocation visit to discuss the application;
- The applicants must confirm that they will be able to attend the Pre-Allocation visit by the given deadline;
- An applicant will be able to contact the HSO re-arrange the date and time for the visit;
- This process may have to be repeated, moving down the shortlist, if some or all of those contacted initially either do not reply or advise they are not interested.

The main purpose of the pre-allocation visit will be to check the accuracy of the information on the application form and generally assesses the applicant's suitability for the vacant property. During the visit the HSO will complete a pre-allocation form (Appendix 6).

Where the HSO finds that information that affects the points total has changed the applicant will be advised that a new points assessment will have to be made, which may affect their position on the housing list. The reassessment will be carried out following the HSO's return to the office following which a further letter with the new points total will be sent to the applicant.

The visit may result in the applicant deciding they no longer wish to be considered for housing by ARK. On returning to the office the HSO will arrange for the application to be cancelled on the database with a note of the reason.

Following the pre-allocation visits the HSO will:

- Take up landlord references;
- Complete the necessary UK Visa requirement checks;
- Complete a Tenancy Recommendation Form (Appendix 7) summarising the results of the shortlisting process and pre-allocation visits;
- Attach relevant background correspondence, notes of visits etc.
- Pass the Recommendation Form and attached papers to the Senior Housing Services Officer for checking and signing off to approve the allocation.

3.2 Nominations

In the event that there are no suitable applicants on the waiting list the HSO may contact the Local Authority to request a nomination for the available property. All nominations received will be processed by the same procedure process as applicants on ARK housing list.

3.3 Section 5 Referral

Housing Associations and Co-operatives have an obligation under Section 5 of the Housing (Scotland) Act 2001 to give reasonable preference to homeless households and to provide accommodation for those households assessed as being unintentionally homeless. Where suitable, ARK will make contact with Local Authorities to request a referral for vacant property. All referrals received will be processed by the same procedure process as applicants on ARK waiting list.

3.4 Exchanges

As part of Edinburgh Housing Exchange the HSA can provide tenants with guidance how to access the scheme if they are wishing to exchange houses within the Edinburgh area only.

ARK does not participate in any house exchange schemes out with the Edinburgh area, however we can make available a list of other Exchange Organisations. There may be a cost to the applicant to join such schemes.

This section assumes that one of those exchanging is the tenant of another Registered Social Landlord.

Where the proposed exchange is between two ARK tenants the action described below relating to the ARK tenant will be applied to both applicants.

A tenant enquiring about an exchange should be advised that they are only granted when certain criteria are met, and that they should read the guidance leaflet (Appendix 8) carefully before completing the Exchange Application form (Appendix 9). The decision to allow a mutual exchange will always be at ARKs discretion.

Following receipt of completed forms the HSO will:

- Acknowledge receipt within 2 working days (Appendix 10);
- Write to the other landlord for a reference (Appendix 11);
- Arrange a termination visit to the ARK tenant with a Maintenance Officer (MO);
- Start to complete the mutual exchange checklist (Appendix 12);
- Check the ARK tenant's rent account for any arrears;
- Enter diary 'prompts' for e.g. 14, 21 & 28 days to ensure that a final or interim reply is sent within the statutory 28-day period.

The HSO will check the other landlord's reference, follow up any queries and discuss any concerns with the Senior Housing Services Officer (SHSO). At the pre-termination visit the HSO will ensure that the outgoing ARK tenant is clear about their responsibilities up to the tenancy termination date.

The MO will:

- Carry out a pre-termination inspection to the same standard as for a void property;
- Note any tenant alterations that have been carried out, check if any approval has been given and if necessary advise the tenant they must either apply for retrospective approval or reinstate the property, before the exchange will be approved;

- Advise the tenant of any repairs and/or redecoration they must carry out before the exchange will be approved;
- Check if there is an Energy Performance Certificate (EPC) in the property and if not, arrange for one to be provided;
- Arrange for gas and electrical safety checks to be carried out on or just before the exchange date.

If there are any alterations the tenant has carried out which ARK will not accept ongoing responsibility the outgoing tenant will be advised that they must remove the item(s) and reinstate the property, before the exchange will be approved.

The MO may make a return visit to check on any specific work to be carried out etc. before the exchange is approved and/or takes place.

The HSO will arrange a pre-allocation visit in the same way as for any other applicant. The HSO will ensure that the checklist is updated at every stage of the process and that it is attached to the Change of Tenancy form when this is submitted to the SHSO with the tenancy recommendation for sign-off.

3.5 Supported Housing Referrals

ARK have local nomination agreements with the following Local Authorities or Care Providers at the developments listed below:

- ARK Court, Fraserburgh
- Ark Dale, Peterhead
- 15-17 Bracken Road, Portlethen
- Institution Street, MacDuff
- Gellymill Road, MacDuff
- Market Street, MacDuff
- 3, 5 & 7 Glebe Road, St. Andrews
- 10a,b,c,d,e Windmill Brae Forfar
- 2 & 4 Burnside Drive, Arbroath
- 2a & 2b Brothock Bridge, Arbroath
- 51 Fairies Road, Perth
- 14 Niddrie Farm Grove
- 5 Longstone Grove
- 73 Stenhouse Place West
- 1 Bedford Court, Alloa
- 54 Roxburgh Street, Grangemouth
- George Court, Loanhead
- Stonefield Place, Hawick
- Quartermile, Edinburgh

Under the agreements with various Local Authorities or Care Providers, a nomination from the relevant Local Authority or Care Providers is requested when the HSO is aware that the property will become empty.

Although there is a nomination agreement this does not mean that the individual put forward for a property will automatically be allocated a property. All of the steps above will have to be completed and it will be the HSO who will make the final decision, based on any local lettings initiatives or Sensitive Letting arrangements, whether or not to approve the nomination. HSO's may discuss the suitability of a particular nominee with the Local Authority and may request an alternative nominee.

The HSO will carry out a pre-allocation visit with a nominated applicant.

3.6 Management Transfer

In extraordinary circumstances, where no other immediate or practical housing solution is possible for an existing ARK tenant, they have the opportunity to apply for a management transfer. This transfer will be accepted at the discretion of the HoHS following the completion of the housing application form detailing the reasons for the move and stating that it was a request for a management transfer.

3.7 Exceptional Circumstances and Using Discretion

In the event that ARK is approached by another RSL, LA or Police we may decide to allocate a property to any individuals in extreme housing need e.g. property is no longer habitable. This allocation will be accepted at the discretion of the HoHS following the completion of the housing application form.

4.0 Reasons to Not Make an Offer

There may various circumstances in which ARK might choose not to make an offer of housing to an applicant on their list. When this happens, ARK will give a clear reason for doing this if this is requested from the applicant.

Following the pre – allocation process ARK will only contact successful applicants.

4.1 Bypassing an Applicant

ARK may decide not to make an offer to the applicant at the top of a short list. If we do, it would be for one of the following reasons:

- The property would not meet the applicant's needs;
- Failure to respond to our communications relating to an offer without good reason;
- Applicant has previously refused an offer of the property or a similar property in the same location;
- The applicant does not match the local lettings initiative;

- The applicant does not meet the following criteria for a sensitive allocation:
 - The applicant will not be able to sustain the tenancy;
 - The allocation would create a lack of stability or imbalance in the community for the applicant;
 - The allocation could be detrimental to the applicants' social wellbeing;
 - Applicants previous conduct could have a negative impact on the existing tenants.

4.2 Suspending an Applicant

In line with suspensions under Section 20B of the Housing (Scotland) Act 1987, Statutory Guidance, the Housing (Scotland) Act 2014 (Scottish Government 2018), ARK may apply a statutory suspension of an applicant if it is found that the applicant meets the criteria which justifies the application being suspended in ARK's Allocation Policy. The suspension of any application will be at the HoHS discretion and ARK will ensure that procedure applied will be in line with statutory guidance.

5.0 Finalising the offer of the tenancy

The HSO will write to the successful applicant to offer them the tenancy (Appendix 13) and arrange a viewing of the property. This will be accompanied by the Offer of Tenancy Acceptance Form (Appendix 14) which the applicant must return to the HSO.

If the tenant accepts the property following the viewing, the HSO will arrange the tenancy sign-up and handover of the property keys. For further details see the New Tenant Sign Up & Settling-in Visit procedure ref: HM23.

Following acceptance of the tenancy offer the HSO will update the Allocations module and Capita tenancy records and remove the property from the Voids Board.

6.0 Rolling review of the housing list

The ARK housing list will be reviewed on a monthly rolling basis.

Each applicant will be written to (Appendix 15) and will be asked to return a tear-off slip by a specific date to confirm that they still wish to remain on the list. If the applicant fails to reply by that date a follow-up letter (Appendix 16) will be sent. If there is no reply to that letter the application will be cancelled on the database, with a note of the reason added. Cancelled applications will be kept for 3 months before being destroyed.

Should the applicant subsequently contact ARK within the 3 month period of being cancelled and ask to remain/be reinstated on the list the SHSO and Head of Housing Services will consider the circumstances and decide whether or not to reinstate the application or require a fresh application to be submitted.

7.0 Implementation & Review

7.1 Implementation

The Head of Housing Services is responsible for ensuring that this procedure is implemented when required by the appropriate staff.

7.2 Review

The Head of Housing services will ensure that this procedure is reviewed at least every three years.

Appendix 1 - Cover letter with Application Pack

Date

Applicant Name

Address 1

Address 2

Address 3

Post code

Dear [Applicant]

Application for housing (areas out with Edinburgh)

Thank you for your interest in applying for housing with ARK. Our application pack includes the following information:

- An application form;
- An Equality Monitoring form;
- An information booklet explaining how to apply and where we have properties;
- A copy of ARK's **Fair Processing Notice** which tells you, and anyone who you declare is part of your household including any children under 12 years of age, how we process your/their information.

When completing the form you should try to provide as much information as possible.

Please return the application form and any supporting documents to the address on the front page of the form.

We will then assess your application, add you to our housing list and write to you to let you know how many points you have been awarded.

Please remember that if your address or housing circumstances change after you have sent us your application it is important that you tell us immediately.

As we are a very small housing association, and cannot guarantee that an offer of housing will be made, we recommend that you also register with other housing providers.

Please do get in touch if you have any questions.

Yours sincerely,

Staff Member

Job Title

ARK Housing Association LTD

Tel: 0131 478 direct dial

emailaddress@arkha.org.uk

Appendix 2 - Application Assessment Sheet

Date Application Received				
Target Date for inputting onto Capita (5 working days from receipt of application)				
Target Date for sending letter (10 working days from receipt of application)				
Application Reference Number				
Applicants' Surname				
Criteria for Assessment	Points	1st	2nd	
Hospital Discharge				
Emergency Residential Care - Adults				
Residential Care - Transition from children to adult				
Medical A				
Domestic Abuse				
Statutory Homelessness				
Severe Abuse/Harassment				
Overcrowded				
Under-occupied				
Medical B				
Insecure Tenancy				
Below Tolerable Standard				
Anti-social behaviour				
Give/Receive Support				
	TOTAL			
Date assessed by HSA				
Date Passed to HSO for Double Pointing if necessary				
Date returned to HSA				
Date input into Capita				
Date Letter Sent (within 10 working days from receipt of application)				
Targets achieved	Y	/	N	
Recommendations/Comments				



Appendix 3 - Pointing Guidance

Category description	Other information	Points
<p>You are in a temporary placement where you may be bed blocking and need a home to suit your health or mobility needs.</p> <p>You may need to be admitted to hospital or a care home on a long term basis as your home is no longer suitable and forms part of a wider support and care package.</p>	<p>Applicants who are currently in hospital and no longer have a home to go to or cannot go back to the home they lived in before as it no longer meets their needs</p> <p>Applicants who have been placed in an emergency residential care setting but the setting is not appropriate for their needs</p> <p>Applicants who are supported in a residential setting as children but because of their age need to move into adult services</p>	40
<p>You need to move for serious health or mobility reasons</p>	<p>Applicants whose current home no longer meets their mobility needs, it cannot be adapted and they are housebound. This priority is generally only given to people who have been assessed as requiring a ground floor home</p>	35
<p>You need to move because of domestic abuse</p>	<p>You or a member of your household are a victim of domestic abuse and you are unable to continue living in your current accommodation</p>	35

Category description	Other information	Points	
You are statutorily homeless	You have a statutorily homeless decision from a Local Authority and it states that you have been assessed as being unintentionally homeless	30	
You need to move because of abuse or harassment	<p>Any applicant that has advised that they victim of verbal or physical and at its most acute, life threatening.</p> <p>Types of abuse and harassment that will be considered are:</p> <ul style="list-style-type: none"> • racial harassment; • religious or sectarian harassment; • homophobic harassment; • transphobic harassment; • harassment of autistic people and people with learning or physical disability; and • sexual harassment. 	30	
You are living in a home that has too many bedrooms	You live in the social rented sector and you have more bedrooms than you need according to this policy	<i>Two or more bedrooms too many</i>	25
		<i>One bedroom too many</i>	20
You are living in a home that has too few bedrooms	You live in the social rented sector and you have more bedrooms than you need according to this policy	<i>Two or more bedrooms too few</i>	25
		<i>One bedroom too few</i>	20
You need to move for health or mobility reasons	You or a member of your household have severe health or mobility difficulties and your current home is unsuitable and makes daily activities difficult, however adaptations could be made to make it more suitable.	20	

Category description	Other information	Points
You do not have secure accommodation	<p>You are living in accommodation that you have been asked to leave eg.</p> <ul style="list-style-type: none"> • Served a Notice to Leave in the Private Rented Sector • Tied accommodation and you are going to retire/be made redundant • An owner – occupier with a repossession notice • Prison leaver 	10
Your home does not meet the Tolerable Standard	Your home is below the Tolerable Standard as set out at Annex 3	5
You need to move because of anti-social behaviour	You or a member of your household have been subject to serious anti-social behaviour	5
You want to move to give or receive support	You want to move closer to someone to whom you give regular support or you want to move closer to someone to whom you give regular support and it allows an individual to continue living independently and prevent the need for a move into residential or specialist accommodation.	5

**** Minimum Standard Size****

Property Size	Bed Space	Household Size
Studio	Single	1 person
1 Bedroom (1 person)	Single	1 person
1 Bedroom (2 person)	Double	1 person or couple
2 Bedroom (3 person)	1 Double + 1 Single	1 person or couple with 1 child/access to children.
2 Bedroom (4 person)	2 Double	1 person or couple with 1 or 2 children/access to children.
3 Bedroom (4 person)	1 Double + 2 Single	Single person/Couple with 2 Children
3 Bedroom (5 person)	2 Double + 1 Single	Single person/couple with 2 or 3 children
3 Bedroom (6 person)	3 Double	Single person/couple with 2, 3, or 4 children provided not more than 2 children of the same sex have to share a room
4 Bedroom (8 person)	4 Double	Single person/couple with 4, 5 or 6 children provided not more than 2 children of the same sex have to share a room

Appendix 4 - Assessment Award Letter

Date

«title1» «forename1» «surname1»
«address1»
«address2» «address3»
«address4»
«address5»
«postcode»

Dear «title1» «surname1»

Application for Housing – Ref: «refno»

Thank you for applying for housing with ARK. You have been placed on our housing list with a total of «totalpoints1» points, a breakdown of which is shown below. These points have been awarded according to the information provided in your application form. We have also noted the areas that you are interested in being housed in.

Details of points awarded in this box
--

Areas applied for	Details of the areas applied for

Your application will be held on our housing list until such time as a suitable vacancy may arise. Please note that ARK cannot guarantee an offer of housing will be made, therefore, it is advisable that you apply to the local council and to other Housing Associations in the area(s) that you wish to be re-housed in as well. Information on other Housing Associations in Scotland can be found on the Scottish Federation of Housing Associations website at www.sfha.co.uk.

If you have a change of housing circumstances please inform us of this immediately.

If you wish to appeal against the Points awarded please contact me and I can provide you with details of our appeals procedure. In the meantime if you require any further information please do not hesitate to contact me.

Yours sincerely,

Appendix 5 - Shortlist/Pre-Allocation Letter

Date

«title1» «forename1» «surname1»
«address1»
«address2» «address3»
«address4»
«address5»
«postcode»

Dear «title1» «surname1»

Application for Housing – Ref: «refno»

I write to advise you that we are currently considering your application along with others for a X bedroom flat at XXXXXXXXXXXX, the details of which are shown below.

Address	
Size	
Floor level	
Monthly Rent & Service Charges	
Available for occupancy	
Please note the information above is for information only and is not a formal offer.	

I plan to visit you at the address provided on your application form on XXXXXXXX to carry out a pre allocation visit.

If you are interested in being considered for this property, please contact me by telephoning ** and confirm you are able to attend the visit proposed above. It would be appreciated if you could have two forms of identification available to show me when I visit, e.g. a birth certificate/council tax bill/benefits letter/utility bill AND a form of photographic ID such as a passport or drivers license. If you are applying as joint applicants I will need this for both applicants.

Should the above not be suitable alternative arrangements can be made.

If we do not hear from you by XXXXXXXXXXXX we will assume that you are not interested in being considered for this property.

Yours sincerely,

Appendix 6 - Pre-Allocation Home Visit Form

PRE-ALLOCATION ASSESSMENT FORM

Applicant Details

	Applicant	Joint Applicant
Name		
Address		
DoB		
NI No		
Contact tel.no		
Tenure details		
Landlord details		
Lease details		
ID provided: e.g. Birth certificate/ Passport/Photographic ID /Benefits letter		

Breach of Tenancy Action

Are there arrears on the account	YES / NO
If yes, amount	
Is there a repayment agreement in place	YES / NO
If yes, is this being adhered to	
Are there any issues relating to ASB	
Has an ASBO been served	YES / NO
NoP: If yes, date served	
Reason for NoP	

Household Details

No of single bedrooms	
No of double bedrooms	

Name	DOB	Relationship to applicant	Living @ above address	Sharing bedrooms
			Y / N	Y / N
			Y / N	Y / N
			Y / N	Y / N
			Y / N	Y / N
			Y / N	Y / N

Current Housing Status

Current status

Medical Conditions

Current status

Is the current property below tolerable standards?

Current status

Support Needs

Details why the current accommodation is unsuitable

Could the current accommodation be adapted to meet the applicant's needs?

Is the applicant currently experiencing domestic abuse/serious abuse or harassment?

Is the applicant currently experiencing anti social behaviour?

Accommodation required

No of bedrooms	
Type	
Lift needed	
Type of heating	

Any other issues

--

Declaration

<p>I/we* declare that:</p> <ul style="list-style-type: none">❖ The answers and information contained in my application dated and on this form are true and complete in all respects;❖ these answers and information shall form the basis of any subsequent Tenancy Agreement entered into between myself and ARK Housing Association;❖ if any of the answers and information I have given is later found to be untrue, this may lead to the ending of any tenancy I may have;❖ I / we* will notify ARK Housing Association of any change in my circumstances that might affect my/our* application for housing. <p>Applicant: _____ Date _____</p> <p>Jt Applicant: _____ Date _____</p>

Visit carried out by: _____ Date _____
Points total: _____
Points updated: _____ Date: _____

Appendix 7 - Tenancy Recommendation Form

Tenancy recommendation form			
Property Address			
Type of Allocation			
Ark Waiting List			
Edindex Waiting List			
Section 5 referral			
Other			
APPLICANT INFORMATION			
Applicant name	POINTS CATEGORIES	FINAL POINTS	REFUSAL/BYPASS REASON
TENANCY RECOMMENDATION			
Proposed Tenant Name:			
Application Reference:			
Reference Attached	YES / NO		
<i>If not able to provide reference please detail reasons why</i>			
Details of Care Package and Care Provider:			
<i>Number or hours/transition details/contact details</i>			
Welfare Financial Guardian Details:			
<i>If the tenant does not have capacity please provide details of legal guardian who will need to sign the tenancy agreement. Please note we will require a copy of guardian order</i>			

<p>How will Rent be paid:</p> <p><i>If an application for Housing Benefit is required please provide information on tenants income and any capital</i></p>	
<p>Furniture Requirements:</p> <p><i>e.g. TOUGH furniture/vinyl flooring</i></p>	
<p>Other Specific Requirements:</p> <p><i>e.g. adaptations required</i></p>	
<p>About the Tenant:</p> <p><i>Please provide details of any illness, disability mental health conditions. In addition we would require knowing if there is any history of antisocial behaviour, problems with conditions of previous tenancies or they are subject to MAPPA conditions.</i></p>	
<p>Proposed tenancy type</p>	
<p>Proposed start date</p>	
<p>Proposed Rent</p>	
<p>Proposed Service charges</p>	
<p>AUTHORISATION DETAILS</p>	
<p>HSO Signature:</p>	<p>Date:</p>
<p>SHSO Signature:</p>	<p>Date:</p>
<p>Any Comments:</p>	

Appendix 8 – Exchange Guidance Notes

1. Before an exchange can be approved, certain conditions have to be met. These are:

- a) You must have a clear rent account and any chargeable repair accounts must be paid.

However, where there are arrears of less than one month's rent, or more than 1 month but you have kept to a satisfactory payment arrangement for at least 3 months, we may agree that it is in both your interest and our interests to approve the exchange.

- b) You must not have received a Notice of Proceedings for the recovery of your property, or have a Sheriff Court decree for repossession awarded against you.
- c) The exchange must not result in the overcrowding or under-occupation of a house. However we may consider a request to move to a similar sized property in another area for special reasons.
- d) If you have made any alterations or improvements to the property you must have received our written permission to carry out the work. If you do not have our permission you must apply for this (or agree to remove the alteration or improvement) before we will approve the exchange.
- e) If you are advised that there is work required, for example repairs or redecoration that are your responsibility under your Tenancy Agreement, this work must be carried out before the exchange can be approved.
- f) To comply with our Allocations Policy, exchanges involving specially adapted bungalows or one bed-roomed bungalows will only be approved if the incoming tenant has a specific medical condition or medical priority.

2. If an exchange is approved, we will agree a date with you for the move to take place. You must not move before this date.

3. We reserve the right to refuse a request for an exchange. We will explain our reasons for refusing a request and you will have the right to appeal against our decision.

4. Gas safety and electrical checks are an important part of the Exchange process. They will be carried out by one of our Contractors.

The **Electrician** will check the following:

- the safety of wiring;
- any additional lighting and/or switches you have installed;
- any existing shower installation;
- any other electrical installation you have added.

The **Gas Engineer** will check:

- the safety and integrity of gas pipework and appliances.

If any of the above are faulty or do not meet the required standard, the exchange will not proceed until the necessary work has been carried out to our satisfaction.

5. Please remember, in agreeing to the exchange you are accepting the condition of the property you are moving to, including:
- the standard of the decoration;
 - any alterations that have been carried out by the other tenant;
 - any damage to the property that has not been reported to the landlord before the exchange goes ahead.

If any of these things need to be put right after the exchange, you will be held responsible for any costs that may arise in carrying out the work.

MUTUAL EXCHANGE CHECKLIST FOR TENANTS

THINKING ABOUT AN EXCHANGE? HERE ARE SOME THINGS YOU MAY WANT TO CHECK OUT ABOUT THE PROPERTY YOU WOULD LIKE TO MOVE TO:

1. Is there any artex on the walls?
2. Has the tenant you wish to exchange with carried out any alterations to their property?
 - Did they get permission from us, or from their Landlord (if they are not an ARK tenant) to do this?
 - Are you willing to take on the responsibility of the alterations if they want to leave them?
3. Is there a gas or electricity point for your cooker?
4. Is there a space for your washing machine, dryer or fridge?
5. Is there any damage to doors, walls, etc.?
6. Is there any damage to sinks, bath or WC's? Are any taps leaking?
7. Check who the gas and/or electricity supplier is at your new address, as you will have to arrange to change the supply to your name.
8. Are there any pre-payment meters for gas or electricity? If there are, do you want to keep them?

If not and you wish to have them fitted you will have to make these arrangements yourself.

Please speak to your Housing Services Officer if you have any questions about any of the information in this guidance not.

Appendix 9 – Exchange Application Form

ARK Housing Association Application for Mutual Exchange

This form must be completed and signed by the applicant(s). **Incomplete forms will be returned and may result in a delay in processing your exchange.** If you have any queries regarding the completion of this, or any of the attached forms, please contact this office on the telephone number below.

Important: Written consent must be given by all landlords before an exchange can go ahead.

1. TENANCY DETAILS

Applicant Tenancy Status (delete as appropriate)	Ark Housing Association Tenant / Non Ark Housing Association Tenant			
Applicant Details	Forename:	Surname:		
	Date of Birth:			
Joint Applicant Name (If Applicable)	Forename:	Surname:		
	Date of Birth:			
Current Address				
Phone Number				
NI Number	Tenant:		Joint Tenant:	
Number of Bedrooms			No. Single	
				No. Double
Landlord Name				
Landlord Address				
Landlord Phone Number				

2. HOUSEHOLD COMPOSITION

Please give details of everyone who will move with you, starting with yourself.

Name	Date of Birth	Relationship to Tenant
		TENANT

3. Has anyone ever taken action against you or anyone on your application for anti-social behaviour?

Yes No

If Yes, please give full name of person (s)

What action was taken?

Court Action

Anti-social behaviour order

Less formal action such a written warning

4. Are you or anyone on your application required to register with the police under the Sexual Offences Act 2003?

Yes No

If Yes, please give full name of person(s)

--

5. DETAILS OF PROSPECTIVE EXCHANGE PARTNER

Applicant Name					
Joint Applicant Name (If applicable)					
Current Address					
Phone Number					
Number of Bedrooms		No. Single		No. Double	
Landlord Name and Address					
Landlord Phone Number					

6. Please give your reasons for wishing to exchange

--

7. DECLARATION

Please read through the following statements and sign at the bottom to show you understand and agree with them.

<p>I / We agree that:</p> <p><input type="checkbox"/> I / we will inform Ark Housing Association of any change in my/our circumstances;</p> <p><input type="checkbox"/> My/ our current or previous landlord can be contacted for a tenancy reference;</p> <p><input type="checkbox"/> My / our doctor, hospital consultant, health visitor, social worker, police or any other relevant person can be contacted if more information is needed for my / our housing application;</p> <p><input type="checkbox"/> All information given by me / us to Ark Housing Association is true. If I / we supply any false information or keep back any information my / our application may be cancelled;</p> <p><input type="checkbox"/> If I / we are given a tenancy because I / we have supplied false information or I /we have kept back information, the tenancy may be ended.</p>	
Tenant's signature _____	Date _____
Joint tenant's signature _____	Date _____

Please return this form to:
Ark Housing Association, The Priory, Canaan Lane, Edinburgh EH10 4SG

Or contact 0131 447 9027 | housing@arkha.org.uk

For office use only

Date forms received		Target processing date	
Recommend Approval	Yes / No	Approval authorised	Yes / No
AHSO/HSO signature		Date	
HM/HSC Signature		Date	

Appendix 10 – Exchange Acknowledgement Letter

Monday, 07 March 2022

Applicant Name

Address 1

Address 2

Town

Post Code

Dear Applicant Name

Re: Mutual Exchange Application

I am writing to acknowledge receipt of your application form to carry out a mutual exchange with a tenant of Ark Housing Association/a tenant from another social landlord. **DELETE AS APPROPRIATE**

We require an application from both parties involved before we can continue the process. We will respond to you within 28 days to confirm if the exchange has been approved.

Please remember that it is important that you gain written consent from both Landlords before a mutual exchange can go ahead.

In the meantime please do not hesitate to contact me if you have any queries.

Yours sincerely,

HSO Name

Housing Services Officer

Tel: 0131 478 8XXX

E-mail: xxxxxx.xxxx@arkha.org.uk

Appendix 11 – Landlord Reference Request

Our Ref : Ref

Landlord's name
Address
Address
Address
Postcode

Date

Dear Sir/Madam

PROPOSED MUTUAL EXCHANGE: Names & Addresses of both applicants

Ark Housing Association has received an application from our tenants, Name(s), to carry out a mutual exchange with your tenants, Name(s).

To help us in assessing this application, could you please complete the enclosed tenancy reference form in respect of your tenant. An early reply would be appreciated to enable us to respond to the application within the 28-day statutory time-limit.

Any information supplied will be treated in confidence.

If you have any enquiries regarding this matter, please do not hesitate to contact me.

Yours faithfully

HSO Name
Housing Services Officer

NAME:
 ADDRESS:
 DATE OF BIRTH:

A TENANCY DETAILS

A1 Is the above named the tenant(s) of the household?

A1b Please confirm members of the household are:

Name	Date of Birth	Relationship to Tenant	NI Number

A2 On what date did their tenancy start?

A3 Please state the type of tenancy in place.

Scottish Secure Tenancy

Short Scottish Secure Tenancy

Other type of tenancy (please detail)

A4 Please list below the members of the tenant's household who will be getting re-housed with them:

B PAYMENT AND ARREARS

B1 What is the rent charge?

Weekly / fortnightly / monthly

What is the service charge?

Weekly / fortnightly / monthly

What is the housing benefit entitlement?

Weekly/ fortnightly / monthly

B2 Has the Tenant any outstanding arrears of rent or service charge?

YES If yes go to QB2

NO If no go to QB8

B3 How much is outstanding?

B4 Are you aware of any reason for the arrears? If so please provide details below.

B5 Has any agreement been made with the Tenant to clear these arrears?

YES If yes go to QB6

NO If no go to QB8

B6 If YES, what date was this agreement made and what is the nature of the agreement?
(Please detail).

B7 If applicable, has payments been adhered to for at least 3 months and still ongoing?

YES QB10

NO Please detail below

B8 Has a notice of proceedings had been issued or court action ever been taken against the tenant for rent/service charge arrears within the last two years?

YES QB9

NO QB10

B9 Action taken & outcome (please detail).

B10 Has the tenant any outstanding Rechargeable Repairs invoices

YES QB11

NO QC1

B11 If YES, how much is due?

B12 Please detail below the reason for the rechargeable repairs?

B13 Has any agreement been made with the Tenant to clear these invoices?

YES QB14

NO QC1

B14 Nature of agreement (please detail).

B15 Has the agreement been in place for 3 consecutive months or more and being adhered to?

YES QC1

NO Please provide details below

C TENANCY AGREEMENT

C1 Has the tenant or any members of their household or anyone visiting acted in anti-social manner or pursued a course of conduct amounting to harassment?

YES	<input type="checkbox"/>	QC6
NO	<input type="checkbox"/>	QC7

C2 Please detail:

<p><u>Nature of Problem:</u></p> <p><i>Action taken (including verbal warnings, written warnings, etc.)-</i></p> <p><i>Outcome -</i></p>
--

C3 Has any anti-social behavior by the Tenant or the Tenant's family or visitors to the house ever resulted in police involvement?

YES	<input type="checkbox"/>	QC6
NO	<input type="checkbox"/>	QC7

C4 Please detail the nature of the action and the outcome.

C5 Has an Anti-Social Behavior Contract been entered into?

YES	<input type="checkbox"/>	QC6
NO	<input type="checkbox"/>	QC7

C6 Please detail the date this was entered into and the nature of the contract.

C7 Has an Anti-Social Behavior Order been granted against the tenant?

YES	<input type="checkbox"/>	QC8
NO	<input type="checkbox"/>	QC9

C8 Please detail the date this was entered into and the nature of the order.

C9 Has the Tenant ever been served with an abandonment notice?

YES	<input type="checkbox"/>	QC10
NO	<input type="checkbox"/>	END

C10 Please state the date(s) served and the outcome

Name of person completing reference: _____

Signature of person completing reference: _____

Contact Tel No in case of queries:

Date of completion: _____

Your assistance in completing this reference form is greatly appreciated.

Appendix 12 - Mutual Exchange Checklist

Name	
Address	
Tel	
How Many Bedrooms	How many in Household

Name	
Address	
Tel	
How Many Bedrooms	How Many in Household

External Applicant Landlord name: _____

- | | | |
|--|------------------------------|-----------------------------|
| 1. Application Forms received form both parties? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| a. Acknowledgement letter sent
Date | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Rent & Repair account checked? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| a. Garage Tenant? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b. Property record checked for adaptations | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Reference request sent to external HA/LA | Date..... | |
| 4. Reference returned from external HA/LA | Date..... | |
| 5. Pre-Termination Visit arranged. | Date..... | |
| 6. Work required before exchange? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| a. Works orders raised if our responsibility? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. Pre-Allocation Visit- Incoming Applicant | Date..... | |

8. Electrical check booked Date.....

a. Electrical certificate received? Date.....

9. Gas safety check booked Date.....

a. Landlord's Record received Date.....

10. Energy Performance Certificate received Date.....

11. Tenancy Date Agreed? Date.....

12. Letters sent advising termination date Yes No

13. Letter sent advising sign-up details? Yes No

Signed Off:..... [HOHS]

Notes:

Appendix 13 - Offer letter

Date

«title1»«forename1»«surname1»
«address1»
«address2»
«address3»
«address4»
«address5»
«postcode»

Dear «title1»«surname1»

Provisional Offer of Tenancy –Tenancy Address

I am pleased to inform you that you are being considered for the following property:

ADDRESS: SIZE of PROPERTY: START DATE:
--

The charges relating to this property are:

RENT SERVICES TOTAL CHARGE: per month
--

Charges are to be paid on or before the 1st of the month.

I would like you to contact me to arrange a viewing for the above property.

Please find enclosed an acceptance form if you could please complete and return prior to or at the viewing.

This is a provisional offer; a final contractual offer will be made when the tenancy agreement is issued to you.

If you have any queries regarding the above, please do not hesitate to contact me.

Yours sincerely

Housing Services Officer

Appendix 14 - Acceptance/Refusal Form

Offer of Tenancy: xxx

I accept/do not accept the offer of the above tenancy.

Tenant Signature _____ Date _____

If tenancy not accepted, please give the reason for refusal.

The tenancy will start on: TBC

Appointment to sign tenancy agreement

Date _____ Time _____

Questions about tenancy

Housing Services Officer Signature _____ **Date** _____

Appendix 15 - Review Letter 1

Date

«title1» «forename1» «surname1»
«title2» «forename2» «surname2»
«address1»
«address2»
«postcode»

Dear «title1» «surname1», «title2» «surname2»

Housing List Review

We are carrying out a review of the housing list and note that you submitted an application form to be included on the list.

If you are still interested in remaining on our list, please complete the tear off slip at the bottom of this letter and return it to this office, at the address shown at the bottom of this letter, by xxxxxxxx

Yours sincerely,

HSA

Housing List Review 20 Initial letter**

Name: «title1» «forename1» «surname1»
«title2» «forename2» «surname2»

Application Ref: «refno»

I wish to confirm that I wish to remain on Ark Housing Association's housing list.

Signed by applicant: _____

Signed by joint applicant: _____

Date: _____

Appendix 16 - Review Letter 2

Date

«title1» «forename1» «surname1»
«title2» «forename2» «surname2»
«address1»
«address2»
«address3»
«address4»
«address5»
«postcode»

Dear «title1» «surname1», «title2» «surname2»

Housing List Review

I refer to my letter of XXXXXX asking if you are still interested in remaining on our list and note that you have not responded.

If you do wish to remain on the list please complete the tear off slip at the bottom of this letter and return it to this office within the next 7 days. If I do not get a reply by that date your application will be removed from the list.

Yours sincerely,

HSA

Housing List Review 20 Reminder**

Name: «title1» «forename1» «surname1»
«title2» «forename2» «surname2»

Application Ref: «refno»

I wish to confirm that I wish to remain on Ark Housing Association's housing list.

Signed by applicant: _____

Signed by joint applicant: _____

Date: _____