



# MossCare Housing Limited Maine Road Application Form

## Information about You

**Main Applicant:**    Male  Female       **Second Applicant:**    Male  Female

Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Miss. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Other <input type="checkbox"/>	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Miss. <input type="checkbox"/>	Ms. <input type="checkbox"/>	Other <input type="checkbox"/>
First Name(s)					First Name(s)				
Surname					Surname				
Date of Birth					Date of Birth				
National Insurance No.					National Insurance No.				

### Address:

	Post Code		Post Code
Day time No.		Day time No.	
Evening/Mobile No.		Evening/Mobile No.	
Email Address:		Email Address:	
Length of time at address years		Length of time at address years	

### Household Members:

Full Name	Occupation	Male/Female	Age	Income
				K
				K
				K
				K

## Financial Information

### Employment Details:

Occupation		Occupation	
Employers Name & Address		Employers Name & Address	
Temporary / Permanent		Temporary / Permanent	
Income (per week/month/annum)		Income (per week/month/annum)	

<p>How will you finance your purchase</p> <p>Cash/Savings <input type="checkbox"/></p> <p>Bank/Building Society <input type="checkbox"/></p> <p>Other (please specify) _____</p>	<p>How will you finance your purchase</p> <p>Cash/Savings <input type="checkbox"/></p> <p>Bank/Building Society <input type="checkbox"/></p> <p>Other (please specify) _____</p>
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<p>What size property are you interested in?</p> <p>1 bed apartment <input type="checkbox"/></p> <p>2 bed apartment <input type="checkbox"/></p>	<p>2 bed house <input type="checkbox"/></p> <p>3 bed house <input type="checkbox"/></p> <p>4 bed house <input type="checkbox"/></p>
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**Policy Statement on Equal Opportunities**

<b>Main Applicant</b>	<b>Second Applicant</b>
How would you describe your ethnic origins?	How would you describe your ethnic origins?
<p>White</p> <p>British <input type="checkbox"/> Irish <input type="checkbox"/> Other <input type="checkbox"/></p>	<p>White</p> <p>British <input type="checkbox"/> Irish <input type="checkbox"/> Other <input type="checkbox"/></p>
<p>Mixed</p> <p>White &amp; Black Caribbean <input type="checkbox"/> White &amp; Black African <input type="checkbox"/> White &amp; Black Asian <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p>	<p>Mixed</p> <p>White &amp; Black Caribbean <input type="checkbox"/> White &amp; Black African <input type="checkbox"/> White &amp; Black Asian <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p>
<p>Asian or Asian British</p> <p>Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/></p>	<p>Asian or Asian British</p> <p>Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/></p>
<p>Black or Black British</p> <p>Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other <input type="checkbox"/></p>	<p>Black or Black British</p> <p>Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other <input type="checkbox"/></p>
<p>Chinese or Ethnic group</p> <p>Chinese <input type="checkbox"/> Other <input type="checkbox"/></p>	<p>Chinese or Ethnic group</p> <p>Chinese <input type="checkbox"/> Other <input type="checkbox"/></p>
<p>Refused <input type="checkbox"/></p>	<p>Refused <input type="checkbox"/></p>

**Office Use Only**

MSRAB **1**  MSRLP **2**  KW **3**  MPRA **4**  GM **5**  Other **6**

**Please return to Chris Davies, Mosscares Housing Ltd, 101 Gt Western St, Moss Side, Manchester, M14 4AA**