

Permanent Residential Site Waiting List Application Form

Completion of this form **does not** guarantee that you will be entered onto the Gypsy or Traveller pitch waiting list or be made an offer of a pitch.

It is important that you provide accurate information and answer all questions. If you do not provide all of the information and requested evidence we need, we may not be able to register your application OR we may not be able to award you the banding to which you may be entitled.

If you provide false information, your application will be void and will be returned to you.

Which site or sites would you like to apply for?

Place a tick in the appropriate box(es)				
Bankside Park		Newington Park		
Bedford Park		Wilmington Park		
1. Name of Appli	cant			
Hamo or Appli				
Surname	First Name(s)	Date of Birth	Place of Birth	
			Place of Birth	
Surname			Place of Birth	

4. Family Members who will be living with you

You may be asked to provide evidence that you live together as a household (e.g. proof of Child Benefit, Income Support etc)

Sur	name	First Name(s)	Date of	Relationship	Name & Place
			Birth	to Applicant	of School
5.		ou live at the mome	nt?		
6.		rent address a legal se provide the name of			∕es

•	Do you have to leave this accommodation for any reason? Yes ☐ No ☐ If yes, please provide detail below				
	Previous Address - provide your	last three addresses			
	Address	Type of Accommodation	No. of Years There		
			There		
	Employment Details - please provemployment of family members livi		ent. Also list the		
		g war you			
)	Benefits				
•	Dononto				
	Are you claiming Housing benefit?	Y	∕es □ No □		

Details of nursery/school, college of children included on this form Name of Nursery/School/College	Na	me	Address	(Site/Pitch No.)	Relationship
Name of Nursery/School/College Address of Nursery/School/College? Yes No 4. Are you on the waiting list for a pitch in another Yes No Authority's area? Name of Authority: 5. How many Caravans, Trailers and Vehicles are you applying to bring on site? See accompanying guidance on site limitations.	14		Addiess	(One/1 horrive.)	Relationsin
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Traile	ers					
Vehic	cles					
Other	-					
16.	16. Do you or a member of your household have a medical condition you wish to inform us of?					
If yes	, please provide fu	ll details below	3			
17.	17. Is there anything else you would like to tell us about your accommodation needs in support of your application?					
		(cor	ntinue on a separate sheet if necessary)			

18. Criminal Convictions

If you, or any member of your household has an unspent conviction for a criminal offence you need to tell us about it.

We do not need this information if your offence is spend under the Rehabilitation of Offenders Act 1974. A conviction is spent once the rehabilitation period has ended.

Some sentences are excluded from rehabilitation and spent	l are therefore never classed as
Do you, or anyone to be accommodated with you, have an unspent conviction for a criminal offence	
	Don't Know
If you or a member of your household has a probatheir details below:	ation officer, please provide
Name: Telephon	e Number:
Contact address:	
19. Data Protection and Your Application	
Hull City Council will use the personal data you provided deciding your application to register your accommon management of the Council's Gypsy & Traveller sites information to other Council departments, School Adr Department for Work and Pensions and any other perior is reasonably necessary for the processing of this appresson, the prevention or detection of any crime or the any of its statutory functions.	odation need and for the proper. We may disclose this missions Team, the Police, the rson or body the Council feels olication, the protection of any
We will not discuss the details of your application with permission.	n anyone else without your
19. Nominated Contact	
Would you like to nominate someone who can cous on your behalf to discuss your application?	ntact Yes □ No □
Would you like this person to receive all corresponding to your application, rather than sending to	
If you have ticked ' yes ' to either of the questions about details here:	ve, please give the person's

Name:	Telephone Number:
Address:	
Relationship to you:	

IMPORTANT

Declaration and Authorisation

I declare that the information I have given on this form is correct and complete.

I agree to Hull City Council sharing details of my application with any relevant agency on a confidential basis. I understand that information may be shared within Hull City Council so that we can improve access to our services.

I agree that Hull City Council may obtain any relevant information about me from other relevant agencies. I understand that relevant agencies may include, but are not limited to, any police force, previous landlords, the probation service, school admissions team and other Council departments.

I understand that if my behaviour is deemed to be unacceptable due to non-payment of rent or other housing debts, anti-social behaviour or wilful damage or neglect to a property of which I have been a tenant/licence holder, then my application may be down-banded or removed from the pitch waiting list.

I understand that if I supply false or incomplete information or if I fail to notify you of any relevant changes in circumstances, I may be guilty of an offence.

I understand that the Council is, by law, entitled to take action to end any pitch licence I may be given as a result of a false statement made by me or another person acting on my behalf.

I understand that this application will be cancelled if I am re-housed by the Council or allocated a pitch licence.

Signature of applicant:
Print name: