

BROCKLESBY ESTATE - HOUSING APPLICATION FORM

Full Name	Date of							
Address	Birth							
71441.000								
	Post Code							
Telephone Number	Home							
Email Address	Work/Mobile)							
Liliali Addi ess								
Marital Status:								
	Single Married Separated Divorced Partner							
Spouse/Partner's Full	Date of							
Name	Birth							
Children	Ages							
5 1 1/5 :								
Employer's/ Business Name &								
Address								
Position								
Spouse/Partner's								
Current Employer's/ Business Name &								
Address								
Position								
Reasons for applying for housing:								
Any connections to the								
Brocklesby Estate?								
	g Society details (This may be used for referencing)							
Bank's Name and Address								
Account Name								
Account No.	Cont Code							
Account No.	Sort Code							
Type of accommodation	required							
	Large House Cottage Bungalow							
Number of bedrooms req	quired: 1 2 3 4 4+							
Preferred location								
	Great Limber Kirmington Brocklesby Cabourne							
	Melton Ross Croxton Habrough Ulceby							
	- Habrough Olceby							
	Croxby Swallow Wootton							

Any specific properties on the										
Estate?										
Maximum rental budget, per month, exclusive of Utilities and										
	sive of Utilii	ties and								
Council Tax?		d C								
Length of Ten	ancy requi	rea?								
When ideally	would you	wish it to								
commence?	commence?									
Do you own a										
Details of pets										
Number of ca	-	o e.g.								
caravans/boa										
Size of garden	preferreu									
Do you or you	ır spouse h	ave any								
convictions? H	Have you ev	er been								
declared bankrupt? Have you any										
County Court										
you? Have you										
Notice Seekin										
Do you curren										
Government l		yes								
Are you curre		ntod								
property?	iitiy iii a i ci	iteu								
How did you h										
Brocklesby Es										
Any other information that may		-								
support your application:										
Referees – fin	ancial and	personal								
(we will not contact these without										
your permission)										
Please t	ick here if	ou would li	ke to be contac	cted regardi	ing all av	ailable p	roperties on t	the Estate		
	•	•		Ū	Ü		•			
our Personal In										
Please keep us informed of any changes in your circumstances. Your application will remain active for six months, after which time it wil										
e cancelled. Please apply again after six months if you wish to remain registered for accommodation with the Brocklesby Estate.										
ĺ									T	
	Signed					Date				
	Cione a d					Data				
	Signed					Date				

Please send or email this form to:

Miss Emily Swift, Brocklesby Estate Office, Brocklesby Park, Lincolnshire, DN41 8PN

Tel: 01469 560214. Email: e.swift@brocklesby.co.uk