

**QUEENS CROSS HOUSING ASSOCIATION
SHARED EQUITY
NOTIFICATION OF INTEREST**

NAME: _____

ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE: _____ (Home) _____ (Mobile)

E-MAIL CONTACT: _____

1. Are you a first-time buyer? YES / NO

2. Are you a current owner-occupier? YES / NO

3. Are you an existing Sharing Owner? YES / NO

4. Do you have a Disability? YES / NO

5. Are you a tenant of Queens Cross H.A.? YES / NO

6. Are you a tenant of another Housing Association? YES / NO

Name of Association: _____

7. Are you a Council tenant? YES / NO

8. Are you a tenant of a private landlord? YES / NO

9. Do you live with family or friends? YES / NO

10. Do you intend to purchase the property jointly with another person? YES / NO

11. How many people do you expect to live in the property 1 / 2 / 3 / 4 / 5 / 6

12. Please indicate which property you may be interested in:

Oban Drive YES / NO

Murano Street YES / NO

Garscube Road YES / NO

Flat Size 1 Bedroom / 2 Bedroom

I understand that completion of this form does not entitle me to be offered a Shared Equity property. However, I will be informed of all aspects and availability of Shared Equity property as delivered by Queens Cross, until I or the Association advise otherwise.

I will contact the Association if I require my details to be up-dated.

Signature: _____

Date: _____