

# West Lothian Housing Register Application for Housing



Please note that failure to complete all sections may result in return of your form and delays in processing your application.

## FOR OFFICIAL USE ONLY

Applicant's name:	<input type="text"/>	Reference number:	<input type="text"/>
Date received:	<input type="text"/>	Time received:	<input type="text"/>
Received by:	<input type="text"/>		
Partner landlord/office received:	<input type="text"/>		
Checked by:	<input type="text"/>		
Date passed to Central Allocations:	<input type="text"/>		
Date received by Central Allocations:	<input type="text"/>		





# Contents

page 2	<b>Section 1</b>	General information
page 3	<b>Section 2</b>	Returning the completed application form
page 4	<b>Section 3</b>	Your household details
page 9	<b>Section 4</b>	Your housing status
page 12	<b>Section 5</b>	Specific information
page 14	<b>Section 6</b>	Your housing conditions
page 16	<b>Section 7</b>	Your housing choice
page 20	<b>Section 8</b>	Declaration





# Section 1:

## General information

### Partners of the West Lothian Housing Register

In this section, we provide general information on:

- data protection;
- changes in circumstances;
- specific information;
- debt issues;
- complaints; and
- completing the form.

#### Data protection

In order to process your housing application form, we need to gather personal information. We process this information in line with data protection legal principles.

You have a right to view or obtain personal information that you supply in relation to your application form. You can get this information free of charge.

We may charge for supplying copies of other personal information that you want. Details about this are contained on our website.

#### Changes in circumstances

You should inform us, as soon as possible, of any changes to your housing circumstances so we can re-assess your application. This is important as changes may affect your application.

#### Specific information

We gather specific information, for example, equality information to monitor our allocation services. This is done to assist us to eliminate unlawful forms of discrimination and also to promote equality objectives.

#### Debt issues

If you have any debt the council can offer help and advice. Services will work together to maximise your income and help by taking account of your circumstances. See page 3 for Advice Shop details.

#### Complaints

If you are dissatisfied with how we provide services relating to making a housing application, you can make a complaint using our organisational complaint policy. Information on this can be provided on request.

#### Completing the form

Key points to follow include:

- answering all relevant questions;
- completing all tick-boxes; and
- seeking assistance if you are unsure about how to answer any question.



## Section 2:

### Returning the completed application form and other documents

You can send your completed application to any of the landlords or Customer Service Centres below.

Your completed application should be sent along with other documents needed. Advice and assistance to complete the application form is also available at these locations. (See section?)

For example, you can arrange a meeting at these offices to complete your application form. You can also download the application on-line at (insert link).

**Note:** Please complete this form using **black ink**; this is better for copying information.

#### **Almond Housing Association**

New Almond House, 44 Etive Walk, Craigshill  
Livingston EH54 5AB

Tel: 01506 439291

Email: [enquiries@almondha.org.uk](mailto:enquiries@almondha.org.uk)

Web: [www.almondha.org.uk](http://www.almondha.org.uk)

#### **Weslo Housing Management**

66 North Bridge Street  
Bathgate EH48 4PP

Tel: 01506 634060 Fax: 01506 639122

Email: <mailto:enquiries@weslohm.co.uk>

Web: [www.weslo-housing.org](http://www.weslo-housing.org)

#### **West Lothian Council**

Tel: 01506 280000  
Fax: 01506 775099

Email: [customer.service@westlothian.gov.uk](mailto:customer.service@westlothian.gov.uk)

Web: [www.westlothian.gov.uk](http://www.westlothian.gov.uk)

### Customer Service Centres (CSC)

#### **Armadales CIS**

1/3 East Main Street, Armadale EH48 2QA

#### **Fauldhouse CIS**

10 Main Street, Fauldhouse EH47 9HX

#### **Bathgate CIS**

Bathgate Partnership Centre, Lindsay House,  
South Bridge St, Bathgate EH48 ITS

#### **Linlithgow CIS**

County Buildings, Linlithgow EH49 7EZ

#### **Blackburn Connected**

The Mill Centre, 10 Sycamore Walk  
Blackburn EH47 7LQ

#### **West Calder CIS**

24-26 Main Street, West Calder EH55 8DR

#### **Broxburn CIS**

Strathbrock Partnership Centre  
189a West Main Street, Broxburn EH52 5LH

#### **Whitburn CIS**

5 East Main Street, Whitburn EH47 0RA

#### **West Lothian Connected**

Almondvale Centre, Livingston EH54 6SN

# Advice<sup>shop</sup>

If you wish independent housing advice telephone **01506 283000**



# Section 3:

## Your household details

This section is the declaration made by the applicant (or applicants) that information provided is correct and that it can be used in certain ways.

Do you want us to deal with someone else on your behalf (a representative) in relation to your application for housing?

 Yes No

Give your representative's details below.

Representative's name

Address

Phone:

If you appoint a representative, all the housing providers taking part in the Common Housing Register can give personal information about you to your representative in connection with your application for housing. You cannot hold any housing provider liable for information shared with your representative.

Do you need an interpreter to assist in communication?

 Yes No

If yes, please provide details:

### Disability

Are you a disabled person?

 Yes No

If yes, please use the space below to explain how we can meet your needs. For example, information being provided in larger print or other formats for visually impaired or blind people.

## This section allows us to gather details about you and the other joint applicant.

If you are applying to be the only tenant, then complete the section below referred to as “you;” and leave the joint applicant section blank.

If you are applying for a tenancy with someone else, the “joint applicant” section must be completed. Please give the address of the joint applicant as this may be different from your address.

If you want to have a joint tenancy with more than one other person, please ask us for the appropriate application form.

### You

**Title** (Mr, Mrs, Miss, other)

**First Name**

**Last Name**

**Maiden Name** (or any other name you have been known by)

**Date of birth**

**National Insurance Number**

**Present Address**

**Postcode**

**Date of moving in**

**Correspondence Address (if different)**

**Postcode**

**Your preferred contact details**

**Daytime phone number**  **Mobile number**

**Email**

### Your status

**Married**       **Partner**       **Single**       **Separated/Divorced**

**Civil partner**       **Widowed**       **Other**

**Your relationship to the joint applicant**

## Joint applicant

Title (Mr, Mrs, Miss, other)

First Name

Last Name

Maiden Name (or any other name you have been known by)

Date of birth

National Insurance Number

Present Address

Postcode

Date of moving in

Correspondence Address (if different)

Postcode

Your preferred contact details

Daytime phone number  Mobile number

Email

### Your status

Married  Partner  Single  Separated/Divorced

Civil partner  Widowed  Other

Your relationship to the joint applicant

## Is any person on this application expecting a baby?

No  Yes

If yes, who is expecting a baby?

When is the baby due?

## Do you have full time custody of your children?

No  Yes

If no to above, please advise what overnight access you have



## Other people who will live with you if you move home

In the table below, give details of everyone who will be moving with you. This can be family members or friends and so on. We need this to work out how many bedrooms are needed and if there is any overcrowding or under-occupation.

Title	Full name	Date of birth	Relationship to you	Gender	Present address	Date of moving in

# Equality information

**We gather equality information to monitor our housing allocation services. For example, equality information is used to promote equal opportunities and to prevent unlawful discrimination.**

Information is optional but is used to ensure that the interests and needs of applicants are addressed. We encourage applicants, therefore, to complete this form. Information provided is processed strictly and confidentially in line with our data protection policy.

Please tick the appropriate box below to indicate the ethnic group you consider yourself to be part of. Answer also for any joint applicant. Other equality information is gathered throughout this form linked to specific housing questions.

What best describes your ethnic group?		
(Please ✓)	You	Joint applicant
White Scottish	<input type="checkbox"/>	<input type="checkbox"/>
White British	<input type="checkbox"/>	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	<input type="checkbox"/>
Gypsy Traveller	<input type="checkbox"/>	<input type="checkbox"/>
Other white background	<input type="checkbox"/> <input type="text" value="Please specify"/>	<input type="checkbox"/> <input type="text" value="Please specify"/>
Mixed-white and black Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
Mixed-white and black African	<input type="checkbox"/>	<input type="checkbox"/>
Mixed-white and Asian	<input type="checkbox"/>	<input type="checkbox"/>
Other mixed background	<input type="checkbox"/> <input type="text" value="Please specify"/>	<input type="checkbox"/> <input type="text" value="Please specify"/>
Indian	<input type="checkbox"/>	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	<input type="checkbox"/>
Other Asian background	<input type="checkbox"/> <input type="text" value="Please specify"/>	<input type="checkbox"/> <input type="text" value="Please specify"/>
Black-Caribbean	<input type="checkbox"/>	<input type="checkbox"/>
African	<input type="checkbox"/>	<input type="checkbox"/>
Other black background	<input type="checkbox"/> <input type="text" value="Please specify"/>	<input type="checkbox"/> <input type="text" value="Please specify"/>
Chinese	<input type="checkbox"/>	<input type="checkbox"/>
Other background	<input type="checkbox"/> <input type="text" value="Please specify"/>	<input type="checkbox"/> <input type="text" value="Please specify"/>
Country of origin	<input type="text"/>	
I do not want to answer any of these questions. <input type="checkbox"/>		



# Section 4:

## Your housing status

**This section asks you questions about your housing status.**

We use this information to assist us in providing you with quality advice about your housing options. This also includes a question about your reasons for applying for housing.

### Your present housing status

**We have divided this section into several parts for easy reference:**

- people in the public housing sector who are council or registered social landlord tenants;
- people in the private sector who are owners or privately renting;
- people living in institutions or care homes;
- people in tied accommodation or HM forces; and
- other applicants.

**Please complete the section that describes your current circumstances**

Public housing sector		APPLICANT 1		APPLICANT 2	
West Lothian Council tenant	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Weslo Housing Management tenant	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Almond Housing Association tenant	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Other council tenant	Which one? <input type="text"/>				
Address	<input type="text"/>				
Housing association tenant	Which one? <input type="text"/>				
Address	<input type="text"/>				
<b>APPLICANT 2</b>					
Other council tenant	Which one? <input type="text"/>				
Address	<input type="text"/>				
Housing association tenant	Which one? <input type="text"/>				
Address	<input type="text"/>				

## Private sector

An owner occupier Yes  No

Private rented sector tenant Yes  No

Landlord address

Landlord contact details

Please complete the section that describes your current circumstances

## Persons leaving care or hospital / prison discharge

### Hospital

Address

Leaving care (“looked after children”) Yes  No

Prison or other institution Yes  No

Date of discharge

## Persons in tied accommodation or HMS forces (army, navy or airforce)

### Living in tied accommodation provided with your job

Name and address of your employer

Date you are leaving tied tenancy

### Serving with HM forces:

Date you are leaving the forces

## Other

Please tick one of the following boxes that describe your housing situation:

- Homeless
- Living with family (parents or other family)
- Living with friends
- Living in a caravan
- Living in a hotel or hostel (including bed and breakfast)
- Living as a subtenant or lodger
- Other (only complete this if none of the above apply)

## Reasons for applying

Please provide us with your reason(s) for wanting to leave your home. This is gathered for monitoring purposes. Please tick the appropriate box or boxes and provide further details in the space below each box.

<input type="checkbox"/> <b>Affordability</b>	Please give further details
<input type="checkbox"/> <b>Leaving care and/or support programme ending</b>	Please give further details
<input type="checkbox"/> <b>Demolition</b>	Please give further details
<input type="checkbox"/> <b>Disrepair</b>	Please give further details
<input type="checkbox"/> <b>Domestic Abuse</b>	Please give further details
<input type="checkbox"/> <b>Employment</b>	Please give further details if you are working or seeking work in West Lothian
<input type="checkbox"/> <b>Forced sale</b>	Please give further details
<input type="checkbox"/> <b>Families forced to live apart</b>	Please give further details
<input type="checkbox"/> <b>Harassment</b>	Please give further details
<input type="checkbox"/> <b>Homelessness</b>	Please give further details
<input type="checkbox"/> <b>Legal notice to leave the property</b>	Please give further details (proof of discharge will be required)
<input type="checkbox"/> <b>Leaving HM forces</b>	Please give further details
<input type="checkbox"/> <b>Leaving prison/hospital</b>	Please give further details
<input type="checkbox"/> <b>Overcrowding</b>	Please give further details
<input type="checkbox"/> <b>Property does not meet physical requirements</b>	Please give further details
<input type="checkbox"/> <b>Property affecting mental health</b>	Please give further details
<input type="checkbox"/> <b>Relationship breakdown</b>	Please give further details
<input type="checkbox"/> <b>Sharing</b>	Please give further details
<input type="checkbox"/> <b>Under occupation</b>	Please give further details
<input type="checkbox"/> <b>Wanting to give or receive support</b>	Please give further details
<input type="checkbox"/> <b>Other</b>	Please give further details



# Section 5:

## Specific information

**This section covers specific issues that are relevant to being offered a tenancy.**

For example, there may be legal reasons or policy reasons why we cannot offer you a tenancy. Legal reasons might include a legal order being in place that prohibits us from making an offer. Or policy reasons might exist for not making an offer such as an applicant's present or previous tenancy conduct.

We advise applicants in all cases if an offer cannot be made, the effects of this and what appeal rights might be available.

The information requested in this section is:

- previous addresses of applicants;
- legal orders;
- management information about previous conduct;
- information about relationships with council, board members and staff.

### Previous addresses

Have you resided in any other addresses in the past three years.  Yes  No

Please list your addresses over the last three years for applicant 1 and 2

Name	Address	Name and address of landlord or mortgage lender	Dates
			From ..... / ..... / ..... To ..... / ..... / .....
			From ..... / ..... / ..... To ..... / ..... / .....
			From ..... / ..... / ..... To ..... / ..... / .....
			From ..... / ..... / ..... To ..... / ..... / .....

Continue on a separate sheet if necessary.

Do you currently own or have previously owned another property?  Yes  No

If yes, is the current status of this sold or rented?

## Legal orders

Are you or anyone who will be moving with you subject to any legal order such as:

- Anti-social behaviour order
- Court orders relating to relationship breakdown
- Sex Offenders Order

Yes       No

This information is required in order for the respective housing provider to carry out a risk assessment if accommodation is being offered.

## Management issues about previous conduct

Have you ever been evicted from your housing due to breach of tenancy or breach of mortgage agreement?

Yes       No

If yes, please explain the reasons why and when this took place

## Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999

Under these, and the Immigration (EEA) Regulations 2006, Local Authorities are required to establish whether a person qualifies for public assistance including housing.

Not applicable as UK resident       Yes      No

Do you have indefinite or exceptional leave to remain in the UK?           

Do you have any restriction on your recourse to public funds?



# Section 6:

## Your housing conditions

We ask this information to assess your present housing conditions so that we can award points based on these conditions.

The conditions for which we award points are contained in our allocation policy. Points can be awarded for physical and social elements of housing need. This section covers the following parts: type of housing; size of present property; and specific housing conditions.

### What type of property do you live in?

(Please tick as appropriate)

- |  |  |
|--|--|
| <input type="checkbox"/> House                   | <input type="checkbox"/> Flat                    |
| <input type="checkbox"/> Maisonette              | <input type="checkbox"/> Mobile home/caravan     |
| <input type="checkbox"/> Sheltered accommodation | <input type="checkbox"/> Bedsit/studio apartment |
| <input type="checkbox"/> Block-of-4              |  |

Other (Please describe):

### If your home is not a house or caravan, what floor is your home on?

(Please tick as appropriate)

- Ground  First  Second  Third  Above third

### Size of present housing

How many bedrooms do you have?

- One  Two  Three  Four  Five  Over five

### How many people live at your current address including your own family?

- Number of couples  
 Number of single males (over 8)  
 Number of single females (over 8)  
 Number of children (under 8)  
 Not Applicable



Who sleeps where?	Relationship to you
Bedroom 1 <input type="text"/>	<input type="text"/>
Bedroom 2 <input type="text"/>	<input type="text"/>
Bedroom 3 <input type="text"/>	<input type="text"/>
Bedroom 4 <input type="text"/>	<input type="text"/>
Bedroom 5 <input type="text"/>	<input type="text"/>

**Does your home lack any of the following?** (Please tick as appropriate)

<input type="checkbox"/> Piped water supply	<input type="checkbox"/> Inside toilet
<input type="checkbox"/> Hot water	<input type="checkbox"/> Wash hand basin
<input type="checkbox"/> Mains electricity	<input type="checkbox"/> Bathroom/shower room
<input type="checkbox"/> Cooking facilities	<input type="checkbox"/> A kitchen sink
<input type="checkbox"/> Not applicable	

**Is your present address affected by dampness or condensation?** (Please tick as appropriate)

No
  Yes - minor
  Yes-major

If you answered 'Yes' please provide details

(If you have an Environmental Health report, please provide as evidence).

**Are any repairs needed at your present address?** (Please tick as appropriate)

No
  Yes - minor
  Yes-major

If you answered 'Yes' please provide details

(If you have an Environmental Health report, please provide as evidence).

**Does your present address have heating?** (Please tick as appropriate)

Yes
  No



# Section 7:

## Your housing choice

Our allocation system takes account of applicant preferences so that we let houses as far as possible in line with their stated choices.

This section is very important and must be completed. This section covers:

- landlords you would consider;
- house types you would consider;
- floor levels;
- bedrooms required;
- heating systems you would consider; and
- areas of preference.

### Please indicate the property type(s) you would accept

(Please tick as appropriate)

#### Bungalow

- Detached
- Semi-detached
- Mid-terraced
- End-terraced

#### House

- Detached
- Semi-detached
- Mid-terraced
- End-terraced

**Maisonette**  
(Own access)

**Maisonette\***  
(Shared access)

**Flat**

**Block-of-4**  
(Own access)

**Block-of-4\***  
(Shared access)

**Split-level house\*\***

**Three storey\*\***

**Sheltered**

**Bed-sit**

\* Common access, shared stairwell

\*\* 3, 4 bedroom: only Almond have this property type in Craigshill

## Please indicate what floor levels of housing you would be willing to accept

(Please tick as appropriate)

Any

Ground floor

First floor

Second floor

Third floor

Above third floor

## Please indicate the size of property you would accept

(Please tick as appropriate)

1 bedroom

2 bedroom

3 bedroom

4 bedroom

5 bedroom

You will be listed for the size of property which you qualify for within the policy.

## If you require an extra bedroom please provide further details

(For example, medical reasons or child access reasons)

If for child access visits, please refer to Letting Pack. Proof must be provided.

## What heating type would you accept?

(Please tick as appropriate)

Any

Gas

Electric

Coal

Please tick the areas below for which you would wish to be considered

(Please tick as appropriate)

Any area in West Lothian

**Armadale Area**

- Armadale
- Blackridge
- Torphichen
- Westfield

**Bathgate Area**

- Ballencrieff
- Bathgate
- Boghall/Kirkton
- Whiteside/Birniehill

**Breich Valley**

- Addiewell
- Breich
- Fauldhouse
- Longridge
- Polbeth
- Stoneyburn
- West Calder

**Broxburn Area**

- Broxburn
- Dechmont
- Ecclesmachan
- Uphall
- Winchburgh

**Linlithgow Area**

- Bridgend
- Linlithgow
- Linlithgow Bridge
- Newton
- Philipstoun
- Threemiletown

**Livingston East Area**

- Craigshill
- East Calder
- Kirknewton
- Mid Calder
- Pumpherston
- Uphall Station
- Wilkieston

**Livingston North Area**

- Deans
- Eliburn/Livingston Village
- Eliburn Tenant Co-op
- Knightsridge
- The Riggs

**Livingston South Area**

- Bellsquarry
- Dedridge
- Howden
- Ladywell

**Whitburn Area**

- Blackburn
- East Whitburn
- Greenrigg
- Seafield
- Whitburn

Please state the area where you would prefer to live (you will be awarded additional points for this area)

## Partners of the West Lothian Housing Register

The Partners of the West Lothian Housing Register are:

- Almond Housing Association
- Weslo Housing Management
- West Lothian Council

Your name will automatically be registered on their waiting lists unless you indicate otherwise.

Please list any Partner Landlords you would not wish to be housed by?

Are you related to a Staff Member/Committee Member/Board Member of Almond Housing Association, Weslo Housing Management or West Lothian Council?

Yes  No (Please tick as appropriate)

a) If yes what is their name?

b) What is their relationship to you?

Do you work for Almond Housing Association, Weslo Housing Management or West Lothian Council?

Yes  No (Please tick as appropriate)

c) If yes please supply Name of Landlord

## Other Housing Providers

West Lothian Council has agreements with other Housing Providers to nominate applicants from the Council list. These are listed at the rear of this document.

Your name will automatically be nominated to these Housing Providers unless you indicate otherwise.

I do not want my name to be nominated.  (Please tick as appropriate)

Note: You can apply for these Housing Providers directly.



# Section 8:

## Declaration

### Formal Declaration

*Please read this declaration carefully and sign it only if you understand it and agree with it.*

I/we agree that West Lothian Council and its partner landlords (they) within the West Lothian Housing Register, may use and share the information provided in this application and that:

They may contact my/our present or previous landlord/mortgage lender for a housing related reference;

They may contact my/our doctor, hospital consultant, health visitor, social worker, or any other relevant person or agency if more information is needed for my/our housing application; and that no further written consent is required by me/us for this information to be released;

That they may suspend offers of housing if legal or management grounds exist for doing so;

That all information provided is accurate and correct and that if housing is granted based on inaccurate or false information provided knowingly and/or recklessly that steps may be taken to end the tenancy in line with legal provisions;

That they would only take steps to end the tenancy on the above ground if this ground is established and it is reasonable to do so with the case being determined by the sheriff at court, including all relevant persons being notified of their rights to attend court to defend their legal interests;

That they can use this information and match it with other housing applications to find suitable mutual exchange opportunities and to share agreed contact details with any suitably matched applicant;

That I/we qualify to apply for housing, for example, having reached the age of at least sixteen;

That I/we must inform the housing provider to which I/we returned the form of changes to my/our circumstances to enable it to be re-assessed, as appropriate;

That this application may be cancelled if I/we do not respond to yearly reviews; and

That this declaration is subject to this application being processed strictly in line with the provisions of the Data Protection Act 1998 and the terms of registration relating to West Lothian Council and other partner housing organisations on the Common Housing Register.

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### Signatures

*(if more than one applicant then both applicants must sign or the form will not be processed.)*

Your signature

Joint applicant's signature

*(if signing on behalf of applicant, proof of Power of Attorney will be required.)*

Date

Date

# Non participating landlords - Contact details

## **Ark Housing Association**

The Priory, Canaan Lane, Edinburgh, EH10 4SG  
0131 447 9027

## **Barony Housing Association**

Unit 1B Fairbairn House 6 Fairbairn Place, Kirkton North, Livingston, EH54 6TN  
0871 700 7777

## **Bield Housing Association**

79 Hopetoun Street, Edinburgh, EH7 4QF  
0131 273 4000

## **Cairn Housing Association**

64A Leven Road, Coatbridge, ML5 2LT  
01236 435210

## **Dunedin/Canmore Housing Association,**

8 Newmart Road, Edinburgh,  
0131 478 8888

## **Castle Rock/Edinvar Housing Association**

1 Hay Avenue, Edinburgh  
0131 657 0600

## **Hanover (Scotland) Housing Association**

95 McDonald Road, Edinburgh  
0131 557 0598

## **Horizon Housing Association**

Leving House Fairbairn Place, Livingston, EH54 6TN  
01506 424140

## **Trust Housing Association**

12 Newmart Road, Edinburgh, EH14 1RL  
0131 444 1200

## **Link Housing Association**

Watling House, Callender Business Park, Falkirk, FK1 1XR  
0845 140 0100

## **Margaret Blackwood Housing Association**

77 Craigmount Brae, Edinburgh, EH12 8YL  
0141 317 7227

## **West Lothian Housing Partnership**

3 Michaelson Square,  
Kirkton Campus  
Livingston, EH54 6AX  
01506 416438

## National Fraud Initiative - Notice To Tenants

Under part 26 of the Public Finance and Accountability (Scotland) Act 2000 West Lothian Council is required to participate in the National Fraud Initiative (NFI) which is a data matching exercise that matches electronic data within and between participating bodies to prevent and detect fraud.

This notice is to advise all tenants that the data held by West Lothian Council in respect of your tenancy and/or housing application will be provided to Audit Scotland as part of the NFI data matching exercise.

The data provided may also be used internally within the council for the purposes of the prevention and detection of fraud.

## Applicants with particular requirements

هذه المعلومات متوفرة بلغة بريل وعلى شريط وبخط كبير وبلغات الجالية.

الرجاء الإتصال بخدمة الترجمة على الهاتف 01506 280000

এই তথ্য আপনি ব্রেইল, টেপ, বড় অক্ষরে এবং কমিউনিটির বিভিন্ন ভাষাগুলিতেও পাবেন। অনুগ্রহ করে ইন্টারপ্রেটেশন অ্যান্ড ট্রান্সলেশন সার্ভিসের সঙ্গে যোগাযোগ করুন। টেলিঃ 01506 280000

這份資料是可以凸字、錄音帶、大字印刷及社區語言的式本提供。請聯絡傳譯及翻譯服務部，電話：01506 280000

ਇਹ ਜਾਣਕਾਰੀ (ਬ੍ਰੇਲ) ਨੈਤੁਰੀਨ ਏ ਪੜ੍ਹਣ ਵਾਲੀ ਲਿਪੀ, ਟੇਪ, ਵੱਡੇ ਫਿੰਟ ਅਤੇ ਸਮਾਜ ਦੀਆ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ। ਕ੍ਰਿਪਾ ਕਰਕੇ ਇੰਟਰਪ੍ਰੈਟੇਸ਼ਨ ਅਤੇ ਟਰਾਂਸਲੇਸ਼ਨ ਸਰਵਿਸ ਨੂੰ ਇਸ ਨੰਬਰ ਤੇ ਸੰਪਰਕ ਕਰੋ : 01506 280000

یہ معلومات بریل (اندھوں کے رسم الخط)، ٹیپ، بڑے حروف کی طباعت اور کمیونٹی میں بولی جانے والی زبانوں میں دستیاب ہے۔ براؤمر بائی انٹر پرائز اینڈ ٹرانسلیٹنگ سروس سے ٹیلیفون نمبر 01506 280000 پر رابطہ قائم کریں۔

Informacje te mogą być przelozone na język Braille'a, dostępne na taśmie magnetofonowej lub wydane dużym drukiem oraz przetlumaczone na języki mniejszosci narodowych.

Prosimy o kontakt z Usługami Tlumaczeniowymi pod numerem 01506 280000

Information is available in braille, tape, large print and community languages. Contact the interpretation and translation service on **01506 280000**.

Text phones offer the opportunity for people with a hearing impairment to access the council. The text phone number is **01506 591652**. A loop system is also available in all offices.

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