



Seven steps to moving home

Transferring your tenancy to another home



As our tenant, moving home is not difficult. To transfer your tenancy to another home, you must have:

- had the tenancy for your present home for at least 18 months; and
- paid your rent on time.

We will assess your circumstances using our 'points system' (see 'Our points system').

1 How to apply for a transfer

If the transfer application form is not with this leaflet, contact our Customer Service Advisors by phoning 0800 040 7989 or sending an e-mail to lettings@originhousing.org.uk.

2 Filling in the form

Fill in the transfer application form and send it to:

Lettings
Origin Housing
St Richards House
110 Eversholt Street
London
NW1 1BS

If you have a medical condition that affects your housing needs you will also need to fill in and send us a medical assessment form, which you can get from us. You must fill in section one, and your GP or consultant must fill in section two.

If you need help filling in any of the forms, please contact us.

3 Assessing the transfer application form

When we receive your form, we will assess it within 15 working days and contact you if we need more information.

To make sure we treat everyone who applies for a transfer fairly, we use our points system, which takes account of whether you are:

- being harassed or experiencing domestic violence;
- moving, so we can carry out major repairs to your home;
- ill, and your home is making your illness or condition worse;
- disabled, and have difficulty moving in your home;
- living in an overcrowded home;
- living in a home that is too big for you; or
- needing to move for some other reason.

4 Our decision

If we accept your application, we will send you a letter giving you a user ID number and PIN (personal identity number).

The letter tells you how many points we have given you (see 'Our points system') which you can use to 'bid' (ask to be considered for) for properties (see 'How you find another home').

We may turn down your application if you have overdue rent or there is some other issue.

If you are unhappy with our decision, you will need to follow our complaints procedure. This is set out in your tenants handbook. If you do not have a copy, you can get one from your Neighbourhood Officer or a Customer Service Advisor. Please write to:

Lettings, Origin Housing, St Richards House, 110 Eversholt Street, London, NW1 1BS.

5 How you find another home

Tenants transfer existing tenancies through our 'choice-based lettings' service. The properties are advertised from Thursday to Monday:

- on our website at www.originhousing.org.uk (click on 'Move', then 'Home Connections');
- on www.homeconnections.org.uk or ring 0845 330 3181
- on our property-advert phone line (0800 040 7989).

How to bid for a property

- Identify the properties marked as 'Origin Housing tenants have priority'.
- Use your user ID and PIN to ask to be considered for a property.
- Read the choice-based letting leaflet, which you can get from our Customer Service Advisors.

6 Considering success

At the end of the bidding period, those with the highest points will be shortlisted.

We will not shortlist tenants who have overdue rent.

If you are shortlisted, we will tell you this in writing and invite you to view the property.

7 Updating your application

If your situation changes (you have a baby, your health changes and so on), please phone a Customer Service Advisor on 0800 040 7989 to get a transfer review form.

We will assess your application again and write to tell you about any changes.

Our points system

Our points system – how we assess your application

Priority A – 300 points

- Four children sleep in one bedroom.
- You need to move for us to carry out major work to the property.
- You are overcrowded (that is, if two children of the opposite sex are sharing the same room and one is aged 10 years or older).
- You are suffering domestic violence.
- You are suffering other violence.
- You are suffering racial harassment.

Priority B – 200 points

- You are a couple living in a studio or one-bedroom property suitable for one person.
- You, or someone you live with, have a high medical need to move.
- Two children of the opposite sex, one of which is eight, are sharing a bedroom.
- You need a live-in carer.
- You are a single tenant and have lived in a studio flat for more than 18 months.

Priority C – 100 points

- You are expecting a baby and need an extra bedroom.
- You, or someone you live with, have a moderate medical condition.
- You need to be near relatives or friends to give or receive support.

Priority D – 50 points

- You have no particular housing need.
- You, or someone who lives with you, has a low medical need to move.

Extra needs points

We can award between one and four points if you, or anyone you live with, have extra needs.



Areas of choice for transfer

BARNET COUNCIL

B1. Barnet, N2

- High Road (E. Finchley)

B3. Barnet, N20

- Totteridge Lane

B10. Barnet, NW9

- Ball Court
- Mannoek Close

B11. Barnet, NW4

- Spencer house

BRENT COUNCIL

B4. Brent, NW2

- Comber Close
- Dollis Hill Lane
- Ivy Road
- Larch Road
- Melrose Avenue
- Pines Road

B5. Brent, NW6

- Aldershot Road
- Burton Road
- Chichester Road
- Christchurch Avenue
- Malvern Road

B6. Brent, NW10

- Aberdeen Road
- All Souls Avenue
- Bruce Road
- Buckingham Road
- Burnley Road
- Charlton Road

- Griffin Close
- Sellons Avenue
- Waterford Way

B8. Brent, HA0

- Brewery Close

B9. Brent, HA9

- Brook Avenue
- Elmstead Avenue

CAMDEN COUNCIL

C1. Kentish Town, NW5

- Athlone Street
- Chetwynd Road
- Dowdney Close
- Falkland Road
- Grafton Terrace
- Hemmingway Close
- Holmes Road
- Malden Road
- Maud Wilkes Close
- Queen's Crescent
- Ryland Road
- Spencer Rise
- Talacre Road
- Twisden Road
- Warden Road
- Willes Road
- York Rise (Pet Free)

C2. Camden Town, NW1

- Arlington Road
- Bayham Street
- Brereton Cottages
- Camden Street
- Farrier Street
- Ferdinand Street
- Grafton Crescent

- Hadley Street
- Jeffrey Street
- King's Terrace
- Mornington Crescent
- Pratt Street
- Randolph Street
- Royal College Street
- St Pancras Way
- Stratford Villas
- William Road
- Parkway

C3. Somers Town, NW1

- Aldenham Street
- Bridgeway Street
- Chalton Street
- Doric Way
- Drummond Crescent
- Eversholt Street
- Phoenix Road
- Polygon Road
- Unity Mews
- Werrington Street
- Longford Street

C4. Holborn, EC1 & WC1

- Bakdwin Gardens (EC1)
- Dorrington Street (EC1)
- Heather Lane (EC1)
- Roseberry Ave. (EC1)
- White Cross (EC1)
- Bedford Way (WC1)
- Cubitt Street (WC1)
- Elm Street (WC1)
- Grays Inn Road (WC1)
- High Holborn (WC1)
- Kings Cross Road (WC1)
- Southhampton Row (WC1)
- Barter Street (WC1)
- Constable Court (WC1)
- Kings Cross Road (WC1)

Areas of choice for transfer continued

C5. Covent Garden, WC2

Vacancies in Covent Garden are very rare and a local connection is essential.

C6. Hampstead, NW3

- Adelaide Road
- Constantine Road
- Fellows Road
- Haverstock Hill
- Primrose Hill Gdns
- Primrose Hill Road
- Fleet Road

C7. Camden, N19

- Brecknock Road

C8. Camden, NW6

- Brassey Road

ENFIELD COUNCIL

E1. Enfield, EN1

- Magpie Close

E2. Enfield, EN3

- Aspen Way
- Cobbett Close
- Keswick Drive
- Larmans Road
- Ordnance Road
- Ramney Drive

E3. Edmonton, N9

- Fore Street
- Bury Street
- Wyldfields Gardens

E4. Edmonton, N18

- Plowman Close
- Watermill Lane
- Whitehead Close

E5. Southgate, N14

- Dalrymple Close

E6. Southgate, N11

- 143 High Road

HARINGAY COUNCIL

H8. Haringey, N11

- Alder Court

HARROW COUNCIL

H9. Harrow, HA2

- Moreton Court

ISLINGTON COUNCIL

I5. Islington, N5

- Kelross Road

I7. Islington, N7

- Parkside Crescent

NORTH HERTS COUNCIL

H1. North Herts

- Blake Close
- Elms Close
- Orchard Way
- Spencer Way
- Station Road

H4. Herts, SG7

- Nightingale Way

WATFORD COUNCIL

W1. Watford

- Barclay Close
- Bramley Court
- Cheshire Drive
- Churchfields Road
- Crusader Way
- Hodges Way
- Jellicoe Road
- Siskin Close
- Stripling Way
- The Highlands
- Wellington Road
- Callowlands
- Whippendell Road
- Queensgate
- Ashleigh Court

STEVENAGE COUNCIL

S1. Stevenage

- Apollo Way
- Cherwell Drive
- Columbus Close
- Julia Gate
- Longcroft Road
- Mead Close
- The Hedgerow



TRANSFER APPLICATION FORM

Please tick the relevant box: **New** or **Review**

Title	Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Mr <input type="checkbox"/>
Main applicant full name	
Joint applicant full name	
Property address	
Marital status	Civil partnership <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> With Partner <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/>

1. HOUSEHOLD TO BE RE-HOUSED

Full name	Gender (Male or Female)	Date of birth	Relationship to applicant
			Applicant

Please list any members of the family not currently living with you, who you would like to be included on your application:

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2. DETAILS OF PRESENT ACCOMMODATION

Are there any adaptations in your home (e.g. rails, ramps)? **Yes** **No**

If YES, please describe:

.....

3. DETAILS OF TRANSFER REQUIREMENTS

3a. Medical factors

Do you, or any member of your household, have any health problems which would affect your housing requirements? **Yes** **No**

If 'YES', please complete and return the Medical Assessment form attached.
If more than one member of your household has a medical reason to move, please request additional medical assessment form.



Please tick any that apply:

I have restricted mobility or have difficulty getting up stairs	
I am blind or visually impaired	
I am deaf or hearing impaired	
I have a progressive disability or chronic illness (e.g. MS, Cancer)	
I have a depressive illness or may have mental health difficulties	
I have a learning disability	
A member of my household has a disability	
Any other	

Will you require your home to have adaptations? Yes No

If YES, what type?

.....

3b. Social factors

Please state briefly any social reasons for which you need to move:

.....

3c. Areas of choice

Origin Housing has street properties in different parts of Greater London. Please use the codes listed on the areas of choice when telling us where you want to live.

Tick as many boxes as you like.

- | | | | | | | |
|------------------------------|-------------------------------|-------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| B1. <input type="checkbox"/> | B3. <input type="checkbox"/> | B3. <input type="checkbox"/> | B4. <input type="checkbox"/> | B5. <input type="checkbox"/> | B6. <input type="checkbox"/> | B8. <input type="checkbox"/> |
| B9. <input type="checkbox"/> | B10. <input type="checkbox"/> | B11. <input type="checkbox"/> | C1. <input type="checkbox"/> | C2. <input type="checkbox"/> | C3. <input type="checkbox"/> | C4. <input type="checkbox"/> |
| C5. <input type="checkbox"/> | C6. <input type="checkbox"/> | C7. <input type="checkbox"/> | C8. <input type="checkbox"/> | E1. <input type="checkbox"/> | E2. <input type="checkbox"/> | E3. <input type="checkbox"/> |
| E4. <input type="checkbox"/> | E5. <input type="checkbox"/> | E6. <input type="checkbox"/> | H8. <input type="checkbox"/> | H9. <input type="checkbox"/> | I5. <input type="checkbox"/> | I7. <input type="checkbox"/> |
| H1. <input type="checkbox"/> | H4. <input type="checkbox"/> | W1. <input type="checkbox"/> | S1. <input type="checkbox"/> | | | |

4. ETHNIC ORIGIN

Please tick any that apply:

White	British	Irish	Other	
Mixed	White & Black Caribbean	White & Black African	White & Asian	Other
Asian or Asian British	Indian	Pakistani	Bangladeshi	Other
Black or Black British	Caribbean	African	Other	
Chinese or other ethnic group	Chinese	Other		
Refused				

5. PREFERRED LANGUAGE

Please tick the option that applies to you:

Amharic (Ethiopian)	<input type="checkbox"/>	Dari	<input type="checkbox"/>	Japanese	<input type="checkbox"/>	Serbo-Croat	<input type="checkbox"/>
Arabic - Kurdish	<input type="checkbox"/>	English	<input checked="" type="checkbox"/>	Kurdish	<input type="checkbox"/>	Sign Language	<input type="checkbox"/>
Arabic	<input type="checkbox"/>	French	<input type="checkbox"/>	Mandarin	<input type="checkbox"/>	Somali	<input type="checkbox"/>
Bengali	<input type="checkbox"/>	Greek	<input type="checkbox"/>	Persian	<input type="checkbox"/>	Spanish	<input type="checkbox"/>
Bosnian	<input type="checkbox"/>	German	<input type="checkbox"/>	Philipino	<input type="checkbox"/>	Thai	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Hindi	<input type="checkbox"/>	Portuguese	<input type="checkbox"/>	Turkish	<input type="checkbox"/>
Cantonese	<input type="checkbox"/>	Iranian	<input type="checkbox"/>	Punjabi	<input type="checkbox"/>	Urdu	<input type="checkbox"/>
Cypriot	<input type="checkbox"/>	Italian	<input type="checkbox"/>	Russian	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>

6. HOW YOU WOULD LIKE TO BE CONTACTED IN THE FUTURE

Please tick the main preferred method and add details in the space provided:

Letter	<input type="checkbox"/>	
Email (please state)	<input type="checkbox"/>	
Mobile phone (please give number)	<input type="checkbox"/>	
Text message (please give number)	<input type="checkbox"/>	
Home Telephone (please give number)	<input type="checkbox"/>	
Typetalk (for hard of hearing)	<input type="checkbox"/>	
Home visit	<input type="checkbox"/>	

Please help us monitor and improve our service to you by answering the following questions. The questions are voluntary and your answers will be kept strictly confidential. By completing this information, you can make us aware of any particular needs you have when we serve you in the future.

7. RELIGION

None Christian Buddhist Hindu Jewish Muslim Sikh Other Prefer not to say

8. SEXUAL ORIENTATION

Heterosexual/Straight Gay Lesbian Bisexual Other
Prefer not to say





9. DATA PROTECTION

The information you have provided is for our use and will only be processed in line with the purposes as detailed in the Data Register held by the Data Registrar, a copy of which is available upon request. However, prior to us being able to process the information you have provided on this form, the Data Protection Act 1998 requires us to receive your consent.

PLEASE WILL YOU THEREFORE TICK THIS BOX TO INDICATE THAT YOU AGREE TO US PROCESSING THIS INFORMATION

Signature:.....

FAILURE TO TICK THIS BOX MAY MEAN THAT WE ARE UNABLE TO ACT UPON THE DETAILS YOU HAVE PROVIDED.

To obtain further details about your rights under the Data Protection Act 1998, please contact our office.

DECLARATION:

I confirm that the information given is correct to the best of my knowledge.
I understand that by providing false information to obtain a transfer I may be committing a breach of tenancy and may lose my home.

I understand that the information on this form will be shared with local authorities and other Registered Social Landlords like housing associations.

I undertake to inform Origin Housing immediately of any changes in the information given.

I understand that this application for housing does not guarantee an offer of accommodation and does not bind the council or housing association in any way.

SIGNATURE OF MAIN APPLICANT:.....

SIGNATURE OF JOINT APPLICANT:.....

DATE:.....

Please return to:

Origin Housing
Lettings Team
St Richard's House
110 Eversholt Street
NW1 1BS

MEDICAL ASSESSMENT FORM

TO SUPPORT A REQUEST FOR A NEW HOME

SECTION 1
TO BE COMPLETED BY APPLICANT

You are asked to complete SECTION 1 of this form and take it to your family doctor or hospital consultant, who is asked to complete SECTION 2. The completed form should be returned by your doctor to the Lettings Team.

Name of Tenant:			
Address:			
Number of Bedrooms:	Floor Level:	Lift: Yes/No	Central Heating: Yes/No
Please give details of the person for whom medical priority is requested:			
Name	Date of Birth	Relationship to Tenant	
What is your illness/disability?			
Why do you think your present home is unsuitable for your medical condition?			

Signed:

Date:

Side 1 of this form should be signed only by the person stated above. A parent or guardian should sign in the case of a child.





MEDICAL ASSESSMENT FORM

TO SUPPORT A REQUEST FOR A NEW HOME

SECTION 2

TO BE COMPLETED BY APPLICANTS FAMILY DOCTOR OR HOSPITAL CONSULTANT

Name of Patient:	
How long have you known the patient?:	
Nature of Patient's Condition:	
How is the patient's health affected by living in his/her present accommodation?	
How will a move to alternative accommodation benefit your patient's medical condition?	
If the patient is suffering because of their present accommodation, please indicate what priority should be given to their application:	FOR PRIORITY A BOX MUST BE TICKED: Urgent (life threatening living conditions) <input type="checkbox"/> High (conditions aggravate serious medical problems) <input type="checkbox"/> Medium (conditions cause moderate medical problems) <input type="checkbox"/> Low (health not affected by present accommodation) <input type="checkbox"/>

Signed:
Address (stamp):

Position:
Date:

If you need this *Seven steps to moving home* translated, in large print, on tape, or in braille, please contact the Contact Centre, your area office, estate officer, support worker or scheme manager.

إن كنت بحاجة إلى ترجمة كراسة "سبعة خطوات للانتقال من منزلك" هذه، أو الحصول عليها بالأحرف
الطباعية الكبيرة أو على شريط كاسيت صوتي، أو بطريقة برايل للمكفوفين، يرجى الاتصال بمركز الاتصالات
(كونتاكت سنتر)، أو بمكتب منطقتك المحلية، أو بالمكتب العقاري، أو بموظف الدعم، أو بمدير المشروع.

Arabic

এই সাতটা স্টেপস টু মোভিং হোম যদি আপনার জন্যে অনুবাদ, বড়ো ছাপার অক্ষর, টেপ অথবা ব্রেইল
(অক্ষ লিখন)-এ প্রয়োজন হয় তা হলে কন্টাক্ট সেন্টার, আপনার এরিয়া অফিস, এস্টেট অফিসার, সাপোর্ট
ওয়ার্কার অথবা স্কিম ম্যানেজারকে অনুগ্রহ করে যোগাযোগ করুন।

Bengali

如欲要求我們把這份遷居七步驟 (*Seven steps to moving home*) 翻譯
成中文、製作成特大字體、錄音帶或凸字版本，請聯絡 Contact Centre
(聯絡中心)、你的地區辦事處、屋苑主任、支援工作人員或計劃經理。

Cantonese

ئه گهر دهتهوئیت ئهم نووسراوهی 'حهوت ههنگاو بۆ گواستنهوهی خانووبه ره - *Seven steps to moving home*
'home' به ته رجومه کراوی، به چاپی پیستی گهوره، لهسهه شریت یان به بریل (شیوازی نووسینی نابینا)
بۆت دابین بکریت، نکایه په یوهندی بکه به سهنته ری په یوهندیکردن، ئۆفیس ی خانووبه ره ی ناوچه کهت،
کارمندی گه ره که کهت، کارمندی پشنگیرییت یا خود به به ریو به ره ی بیناکه.

Kurdish

Haddii aad rabtid in *Toddobadaan tillaabo ee lagu guuro* la turjimo, lagu daabaco far-
waa-wayn, cajal, ama farta indhoolaha Braille, fadlan ka xiriir Xarunta Xiriirka,
xafiiska xaafaddaada, sarkaalka xaafaddaada, hawlwadeenka taageerida ama
maamulaha nidaamka.

Somali

Si necesita el folleto *Seven steps to moving home* (los siete pasos para mudarse de
casa) traducido, en letra grande, en cinta o en braille, póngase en contacto con el
Centro de Contactos, la oficina de su zona, el funcionario de la urbanización, el
trabajador de apoyo o el gerente del programa.

Spanish

Taşınmadan önceki yedi adım'ın büyük puntolarla, kasette veya Braille ile
(görmeyenler için) yazılmış bir nüshasına ihtiyacınız varsa, lütfen İlişki Merkezi,
yörenizdeki daire, site memuru, destek memuru ya da proje yöneticinizle temas
kurun.

Turkish

اس کتابچہ میں بتایا گیا ہے کہ مکان بدلتے وقت کون سی بات تداہیر اختیار کرنی چاہئیں۔ اگر آپ کو اس کتابچہ کا ترجمہ
درکار ہو یا یہ کتابچہ اگر آپ کو بڑے حروف کی چھپائی، ٹیپ پر یا بریل میں چاہئے تو برائے مہربانی کاٹیکٹ سینٹر، اپنے
ایریا آفس، اسٹیٹ آفیسر، سپورٹ ورکر یا اسکیم مینیجر سے رابطہ کریں۔

Urdu



St. Richards House, 110 Eversholt Street, London, NW1 1BS
Tel: 020 7209 9222 Fax: 020 7209 9223
enquiries@originhousing.org.uk www.originhousing.org.uk