App Ref	
Name	
Date of Application	



#### HOUSING ASSOCIATION

# Mobility Needs Housing Application

#### **Supporting Evidence**

We will tell you what Group and Priority you have been given based on information that you give us in this form.

Some of the questions in the form ask you to supply proof or evidence of your circumstances. It is important that you supply this information so that your application can be fully assessed, and we give you the correct group and level of priority.

If you don't supply all the information required, we will contact you. However, if we don't receive what is needed within 28 days of us asking for it, your application may be cancelled.

If you need help to fill in this form, please contact us.

If you are returning this application by post, please ensure that you pay the correct postage as the Association does not accept responsibility for any undelivered items.

#### **Mobility Questionnaire**

Details of person claiming medical priority				
First name				
Last name				
Date of Birth				

Please describe your current health conditions and symptoms:

Why is your current home unsuitable for your mobility needs?

Do you have difficultieswalking?					
Yes – can only walk short distances	Yes - unable to walk	No			

If yes, do you use any aids or special equipment?						
Crutches	Walking stick Walking frame					
Wheelchair (indoor use)	Wheelchair (outdoor use)					
Do you have difficulties climbing stairs?						
Yes No						
Please indicate how many stairs there are at your current property?						
Inside Outside						

How many stairs can you manage easily?

Do you require an additional space for a carer?			
Yes	No		
Why do you require an additional space for a carer?			

How many carers do you have?

Do you require an additional space for medical equipment?

Yes No

If yes, is a larger or separate room required?	
Larger room required	Separate room required
Please note, to assess your application for an add confirmation from a Health Professional.	ditional space we require written

#### **Property Features**

We define our properties as wheelchair and amenity standard based on the features included in the property. Please specify what features you currently have in your property and what features you require to allow us to queue you for a suitable property type.

Feature	Current Property		Required	
Shower over bath	Yes	No	Yes	No
Step in shower	Yes	No	Yes	No
Level access shower area	Yes	No	Yes	No

General Practitioner information of person claiming medical priority				
Name				
Practice Name				
Address				
Telephone Number				

I hereby declare that the information supplied is true and accurate and I give my permission for Williamsburgh Housing Association to contact my GP should they require any additional information.

	Main Applicant	Person claiming medical priority
Name (Please print)		
Signature		
Date		

#### **Emergency housing**

If you are homeless, are about to become homeless, are a refugee, or you or your children are experiencing violence or abuse from a member of your household, you should contact:

Renfrewshire Council, Development and Housing Services, Housing Advice and Homeless Services 15 Abercorn Street, Paisley, PA3 4AA 0300 300 0222 during office hours, or 0800 121 4466 out with office hours.

Co	nta	ctir	ıa	VΩ	u
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We aim to contact you in a format that is accessible to you. Please give us details if you wish to receive any future correspondence or information in an alternative format.						

Where did you hear about Williamsburgh Housing Association?	Please tick
Advert	
Friend or Relative	
Other Landlord	
Social Media	
Williamsburgh Housing Association Office	

#### **Confidentiality and Data Protection**

Any information given to us as part of the application process will be processed in compliance with Data Protection Legislation.

You can ask to look at the information held on your record. If you wish to do this, you should make a written request to the Association. There is a fee applied for this service, which should be sent to us along with the request and we will respond within one.

#### Do you have a disability?

Please tell us if you or any joint applicant have any of the following disabilities. This will allow us to communicate appropriately with you.

	Applicant (Please tick)	Joint Applicant (Pleasetick)
Autism Spectrum Disorder		
Blindness		
Hearing difficulties Learning		
difficulties Mental health		
problems Partial sight		
Physical disability		
Other		

#### Sharing information with someone else

I/we give permission to share information about the progress of my housing application with:

	Applicant	Joint Applicant
Representative's name:		
Representative's date of birth or organisation		
Representative's telephone number		
Applicant's signature		
Joint applicant's signature		

Does anyone hold Power of Attorney for you? If so, please provide a copy of the Power of Attorney along with supporting proof from a medical professional.

	Applicant	Joint Applicant
Representative's name:		
Representative's date of birth or organisation		
Representative's telephone number		
Applicant's signature		
Joint applicant's signature		
Reason for Power of Attorney?	Financial	Financial
	Welfare	Welfare

#### Information we need about you and any joint applicant

	Applicant	Joint Applicant
Title	Mr/Mrs/Miss/Ms	Mr/Mrs/Miss/Ms
First name		
Last name		
National insurance number		
Date of birth	/ /	1 1
Gender	Male / Female	Male / Female
Relationship to joint applicant (if any)		
Home telephone Number*		
Mobile Telephone Number*		
Email address*		
*By providing us with your co	ntact information above you are co	onsenting to us contacting

Current address		
House number:		
Flat position:		
Street:		
Town:		
Postcode:		
Date moved in:		
	House number:	
Where an email address is not available, we will only	Flat position:	
write to one address per application form. Which address should we send all correspondence to?	Street:	
	Town:	
	Postcode:	

<sup>\*</sup>By providing us with your contact information above you are consenting to us contacting you via these methods. Please note, where an email address is provided we will send correspondence via email wherepossible.

#### Information on who else will be moving with you

Please give details of everyone who will be living with you when you move. You need to tell us about people who do not currently live with you but will when you move. If your child/children stay with you overnight, for only part of the week, or you have a shared residency agreement, please provide proof detailing how many nights per week.

Name	Male/ Female/ Unborn	Relationship to you	bir (or c	Date of birth or date (pected) Are they living with you now?		with	If no, please give their current address	Da mov ir	ved
			/	1	Yes	No		/	1
			/	1	Yes	No		/	1
			/	1	Yes	No		/	1
			/	1	Yes	No		/	1
			1	/	Yes	No		/	1
			/	/	Yes	No		/	1

## Please tell us who lives with you but who will not be moving with you: You

Name	Male/Female	Date of birth	Relationship to you
		1 1	
		/ /	
		1 1	

#### Joint applicant

Name	Male/Female	Date of birth	Relationship to you
		/ /	
		1 1	
		/ /	

If you are a te	nant, please give your landlord	s details.		
You	Name of landlord			
	Address of landlord			
	Telephone number			
	Email address			
Joint applicant	Name of landlord			
аррисанс	Address of landlord			
	Telephone number			
	Email address			
	y reason why we cannot landlord, please give			
•	your present home on? ground (0), first floor (1), fourth	n floor (4) etc.		
You		Joint applicant		
•	roperty do you live in? he number of rooms in your ho	ome	You	Joint tenant
Living room(s)				
Separate dinir	ng room			
Double bedro	om(s)			
Single bedroo	m(s)			

#### Information we need about you and your joint applicant (if required)

#### What type of property do you and your joint applicant live in?

Property type	You	Joint	Property type	You	Joint
House:			Maisonette:		
Detached			Balcony access		
Semi detached			Walk-up		
End terrace			Own door		
Mid terrace			Other:		
Flat:			Caravan		
Tenement			Prison		
Multi storey			Hospital		
Balcony access			Homeless accommodation		
Own door			Pre-fab		
Walk-up			HM Forces accommodation		
Bungalow:			Hostel		
Detached			No fixed address		
End terrace			Sheltered:		
Semi detached			Flat		
Mid terrace			Bungalow		

Other – please give details:

At your present address are you? (please tick one box)	You	Joint
Williamsburgh Housing Association tenant		
Renfrewshire Council tenant		
Another Council tenant		
A Housing Association or co-op tenant		
Private landlord tenant		
Owner occupier		
HM Forces accommodation		
Lodger (a person who rents a room in a house from the owner/tenant of that house and where the owner/tenant also lives and shares the accommodation with the lodger)		
Supported or specialist accommodation (where care, support or supervision is provided to occupants of that accommodation)		
Residential care (provides accommodation with board, for example, meals and provides personal care for people who need care because of age, disability, dependence on drugs/alcohol or mental health impairment) or hospital		
I have nowhere permanent to live		
Staying with family		
Staying with friends		
Prison		
Housing tied to employment		
Other – please give details		'

#### Information about previous addresses

Apart from your current address, where else have you lived in the last 3 years?

Main Applicant Previous Address	Date moved in	Date moved out	Type of tenure*	Landlord's name	Reason for leaving	Any outstanding housing related debt?
	11	11				
	11	11				
	11	11				
	11	11				

Joint Applicant Previous Address	Date moved in	Date moved out	Type of tenure*	Landlord's name	Reason for leaving	Any outstanding housing related debt?
	11	11				
	11	11				
	11	11				
	11	11				

<sup>\*</sup> By tenure we want to know if you are a home owner, rent your home from a local authority (council), housing association or a private landlord. You may also be a tied tenant, live 'care of' family or friends or have other living arrangements, which you should clearly state.

Please note that we will seek tenancy references from your landlord(s) from the previous three years. This reference will include checks involving the conduct of your tenancy and the history of your rent account. Should this be unsatisfactory we will suspend your application.

#### Reasons for Applying and Supporting Evidence Required

#### Required for everyone moving with you:

Identification (ID)	Birth Certificate, Driving Licence, Passport, MATB1form (Confirming expected due date if you are pregnant)
Proof of Address	Bank Statement, Utility Bill or any official letter dated in the previous 6 months.

To allow us to prioritise your application you must submit the required evidence for each reason. Please tick all reasons why you are applying for housing with us.

Current circumstance	Evidence to be submitted	You	Joint
Current homeis too small	A copy of your tenancy agreement, property missives or other formal proof of your property size if you are not a tenant of the landlord to which you areapplying.		
Current homeis too big	A copy of your tenancy agreement, property missives or other formal proof of your property size if you are not a tenant of the landlord to which you areapplying.		
Harassment targeted at you in or around your home (e.g. threatening behaviour, assault, disturbance)	We will only give you priority if there is evidence that the harassment is targeted at you or a member of your household, in or around your current accommodation. You must provide written confirmation from a relevant agency e.g. Police/Landlord confirming the harassment and the nature of the harassment.		
Domestic abuse	Confirmation from a social worker, Victim Support or Women's Aid or written confirmation from the applicant that you are experiencing domestic abuse.		
Relationship breakdown with your partner	Letter from your solicitor or written confirmation from you and if possible, your partner confirming the breakdown.		
To provide or receive support	A letter from a relevant agency e.g., social worker, health professional, or proof of DLA/PIP/carers allowance/ attendance allowance, also a letter from both parties explaining why you need to move.		
For mobility reasons	Please complete the Medical Questionnaire.		
Want a home of my own	Written confirmation from the householder(s) you temporarily reside with.		
Homeless or threatened with homelessness	A letter from Renfrewshire Council confirming that you are statutorily homeless.		
Repossession order/ court order	Copy of the repossession/court order confirming that your house is to be repossessed or sold and the reasons why.		

Current circumstance	Evidence to be submitted	You	Joint
Notice to Leave (private rented tenancy)	Written proof confirming that your tenancy is not being renewed and you have to leave through no fault of your own. Copy of the Notice to Leave. Your landlord should give you these if they want you to leave.		
Leaving tied accommodation	A letter from your landlord confirming your date to leave and the reasons you have to leave. We also need a copy of your employment contract.		
Leaving residential care/hospital/ supported accommodation.	Written confirmation from the relevant agency that you have nowhere to live when you leave. If you have a date to leave, please provide written confirmation.		
In prison	Written confirmation from the relevant agency that you are currently in prison and will have nowhere to live when you leave. If you have a date to leave, please provide written confirmation.		
Leaving HM Forces	A letter from HM Forces confirming that you will have nowhere to live when you leave. If you have a date of discharge, please provide written confirmation.		
To take up or stay in employment	Written evidence to support your circumstances e.g. letter from employer/prospective employer supporting the application and outlining why the applicant need to move to keep/take up their job.		
Access to children/ joint/shared custody	Written confirmation from a solicitor/ex-partner confirming details of overnight access.		
I have applied to foster a child	Written confirmation from the local authority or agency you have applied to that you are in the final stages of the assessment process and require an additional bedroom to be approved to foster. We will only consider applications that are in the final stages of this process and are approved subject to having an additional bedroom where applicant has no spare bedroom.		
Kinship Carer	Written confirmation from the local authority or agency you have applied to that you are in the final stages of the assessment process and require an additional bedroom to be approved to be a Kinship Carer. We will only consider applications that are in the final stages of this process and are approved subject to having an additional bedroom where applicant has no spare bedroom.		

Current circumstance	Evidence to be submitted	You	Joint
I have applied to adopt a child	Written confirmation from the local authority or agency you have applied to that you are in the final stages of the assessment process and require an additional bedroom to be approved to adopt. We will only consider applications that are in the final stages of this process and are approved subject to having an additional bedroom where applicant has no spare bedroom.		
Property is below tolerable standard, for example structurally unstable, rising or penetrating damp	Copy of confirmation from the relevant Local Authority department confirming that your property fails to meet the tolerable standard.		
Other – please state	Proof will be dependent on circumstances.		
Health and Social Care Panel award	Please advise if you have a current award from the Community Care Panel/Health and Social Care Panel We will contact them to confirm your award.		

#### If you are applying because of harassment, please answer the following:

What type of harassment? E.g Physical, racial, verbal	
Who is causing the harassment? E.g neighbour, neighbours' visitors	
Dates of incidents	
Incident numbers	
Location of where the harassment took place	
Has this been reported to your current landlord, Police, Social Work or anyone else?	
Names and addresses of persons responsible	
Any other relevant information	

#### Support

If you are applying because you are providing or receiving support, please provide details of who will support you or of the person you wish to support

Is the support	Given		Received	
Name				
Relationship to you				
Address				
Telephone Number				
Briefly describe the support you give/receive				
How often is the support required?				
If you are under 26, have you	ever been in care	as a 'looked afte	r' person?	
Yes		No		
If yes, please give details:  Do you or your joint applicant	own or rent any o	ther property wh	ich you do not live in	?
You	Yes No	Joint applicant	Yes	No
Address:		Address:		
Reason for not living there:		Reason for not	living there:	

## Additional bedroom required Please tell us if you need another bedroom for any of the following reasons: I have applied to adopt achild Who have you applied to adopt with? State local authority or agency I have applied to foster a child Who have you applied to foster with? State local authority or agency Kinship Care Joint custody award Overnight child access How many nights perweek? Please provide proof and/or supporting information if you tick any of the above. Your choice of housing What floor level would you accept? Ground First Second Third If you require a one-bedroom property would you consider a property with a combined living room and kitchen?

No

Yes

## Please look at 'Your Family Composition' below and select the size of property your family will be entitled to based on our guidelines:

Your Family Composition:	Please tick	Size of property you are entitled to with Williamsburgh Housing:
Single person		1apt 1p Living/bedroom/kitchen combined.
Single person		2apt 1p One single bedroom.
Couple or single person		<b>2apt 2p</b> One double bedroom.
Family (single parent or couple) with child access or a carer		2apt 2p with flexi One double bedroom with one flexi room. A flexi room is for occasional use.
Family (single parent or couple) with one child regardless of age.		<b>3apt 3p</b> One double bedroom and one single bedroom.
Family (single parent or couple) with two children of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		3apt 4p Two double bedrooms.
Family (single parent or couple) with two children regardless of age.		4apt 4p One double and two single bedrooms.
Family (single parent or couple) with three children. The two sharing the double bedroom can be of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		<b>4apt 5p</b> Two double bedrooms and one single bedroom.
Family (single parent or couple) with four children. Two sharing each double bedroom can be of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		4apt 6p Three double bedrooms.
Family (single parent or couple) with four children. Two sharing the double bedroom can be of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		5apt 6p Two double bedrooms and two single bedrooms.
Family (single parent or couple) with five children. Two sharing each double bedroom can be of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		<b>5apt 7p</b> Three double bedrooms and one single bedroom.
Family (single parent or couple) with five children. Two sharing each double bedroom can be of same sex to age 16 of oldest child or different sexes up to age 10 of oldest child.		<b>6apt 7p</b> Two double bedrooms and three single bedrooms.

# Amenity Needs Properties – Ground floor only, would suit those with mobility needs. Would NOT suit wheelchair users

Letting Area	Street	House Type	1 Apt	2 Apt	2 Apt 2p	2 Apt 2P Flexi	3 Apt	3 Apt	4 Apt 4p	4 Apt 5p
Blackhall										
(Please tick box)	Blackford Road	Cottage Flat								
Johnstone	Brewery Street	Main Door Flat								
(Please tick box)	Broomward Drive	Cottage Flat								
	Buchanan Street	Main Door Flat								
	Buchanan Way	Main Door Flat								
		Tenement								
	Clark Street	Main Door Flat								
	John Lang Street	Cottage Flat								
		Main Door Flat								
	Miller Street	Cottage Flat								
		Tenement								
	Rankine Place	Main Door Flat								
		Tenement								
	Rankine Street	End Terrace								
		Main Door Flat								
	Thomson Street, Johnstone	Cottage Flat								
		Tenement								
Paisley East	Bank Street	Tenement								
(Please tick box)	Clarence Street	Tenement								
	Cochran Street	Tenement								
	Dunn Street	Tenement								
	Kilnside Road	Tenement								
	Lacy Street	Tenement								
	Lang Street	Tenement								
	McKerrell Street	Tenement								
	Seedhill Road	Tenement								
	Unsted Place	Tenement								
	Williamsburgh Terrace	Tenement								

Letting Area	Street	House Type	1 Apt 1p	2 Apt 1p	2 Apt	2 Apt 2P Flexi	3 Apt	3 Apt	4 Apt 4p	4 Apt 5p
Paisley North	Caledonia Street	Tenement								
(Please tick box)	Love Street	Attached House								
		Tenement								
	New Sneddon Street	Tenement								
	Renfrew Road	Main Door Flat								
	St Margarets Court	Tenement								
	Wallace Street	Tenement								
Paisley West	Underwood Court	Tenement								
(Please tick box)	William Street	Tenement								
Renfrew	Birch Place	Main Door Flat								
(Please tick box)		Tenement								
	Birch Way	Main Door Flat								
	Moorpark Square	Tenement								
	Paisley Road	Tenement								
	Porterfield Road	Tenement								
	Thompson Street, Renfrew	Tenement								
	Victoria Drive East	Tenement								

# Wheelchair Needs Properties – Ground floor only, for wheelchair users

Letting Area	Street	House Type	2 Apt	3 Apt	3 Apt 4p	4 Apt 4p	4 Apt 5p	5 Apt 5p	4 Apt 6p	5 Apt 7p
Blackhall	Blackford Road	Cottage Flat								
(Please tick box)		Semi								
Johnstone	Cassidy Drive	Main Door Flat								
(Please tick box)	John Lang Street	Main Door Flat								
		Main Door Flat								
	Rankine Place	Tenement								
Paisley East	Bank Street	Tenement								
(Please tick box)	Clarence Street	Tenement								
	Cochran Street	Tenement								
	Dunn Street	Tenement								
	Kilnside Road	Tenement								
	Seedhill Road	Tenement								
	Unsted Place	Tenement								
Paisley North	Caledonia Street	Tenement								
(Please tick box)	Love Street	Tenement								
	New Sneddon Street	Main Door Flat								
		Tenement								
	North Lodge	Detached House								
	South Lodge	Detached House								
	St Margarets Court	Tenement								
	Wallace Street	Tenement								
Paisley West	Broomlands Lane	Tenement								
(Please tick box)	Underwood Court	Tenement								
Renfrew	Albert Wynd	Semi								
(Please tick box)	Birch Place	Main Door Flat								
	Porterfield Road	Tenement								

#### What is mutual exchange?

A mutual exchange is a way for social housing residents to find a move by swapping homes with another social housing resident.



You can swap homes providing you have the right to mutual exchange and both parties wish to swap.



# How to get started on House Exchange



- Visit houseexchange.org.uk to complete the quick online registration
- Have the following details ready:
  - G1Name and contact details
  - G1Current address, property information and landlord
  - G1An idea of where you wantto live, anywhere in the UK
  - Once you're registered and your account is activated, your advert will appear for other registered users to view

#### Other important information

In addition to the information, you have provided earlier in this form, there are several other important areas that we need to know about when processing your application and considering you for housing with us. Please answer all these questions fully.

#### Your eligibility for housing

The law covering asylum and immigration is complex and applies differently to the Council and the housing association partners.

If you could be affected by the legislation, you must advise us. We may be unable to assist but may be able to provide details to you of agencies who can help you.

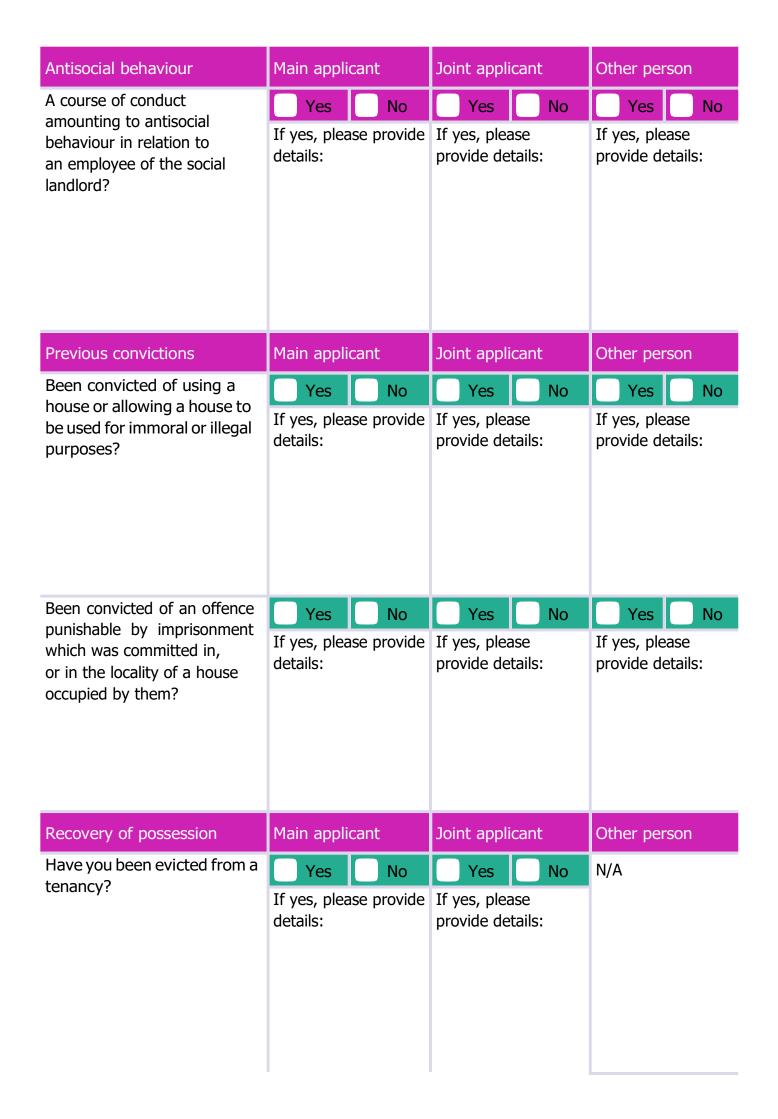
Please answer the questions below.

	Main applicant		Joint applicant	
What is your nationality?				
Are you subject to immigration control?	Yes	No	Yes	No
Are there conditions or limits to your leave to remain/right to reside in the UK?	Yes	No	Yes	No
If yes, please give details				

Please provide us with the following important information about your current and previous addresses:

In the past 3 years, has anyone ever acted against you, joint applicant or anyone moving with you, or a visitor to your home, for anti-social behaviour in the following:

Antisocial behaviour	Main appli	cant	Joint appli	icant	Other per	rson
At your current or any previous address?	Yes	No	Yes	No	Yes	No
previous address:	If yes, pleadetails:	ise provide	If yes, plea provide de		If yes, ple provide de	
Harassment of another	Yes	No	Yes	No	Yes	No
person, or antisocial behaviour towards another person?	If yes, please provide details:		If yes, please provide details:		If yes, please provide details:	



Abandoning or neglecting a let property	Main applicant	Joint applicant	Other person	
Has a tenancy been repossessed by a social landlordbecause the property was abandoned by you, or where a court order has ordered recovery of possession due to the deterioration of the condition of the property or furniture provided for your use?	Yes No  If yes, please provide details:	Yes No  If yes, please provide details:	N/A	
Rent arrears or other tenancy debt	Main applicant	Joint applicant	Other person	
Have any housing related debt from their current or former tenancy in the last 3 years? If yes please complete page 4.	Yes No  If yes, please provide details:	Yes No  If yes, please provide details:	N/A	
Sexual Offences Act 2003	Main applicant	Joint applicant	Other person	
Required to register with the Police under the Sexual Offences Act 2003?  A requirement to register under the Act will not affect the assessment of your application but may affect where you could be rehoused.	Yes No  If yes, please provide details:	Yes No  If yes, please provide details:	Yes No  If yes, please provide details:	
Personal connections with Williams	sburgh Housing Asso	ociation		
We will tell our committee if we allocate housing to employees, former employees, Committee members, former Committee members or their close relatives. Close relatives, including step relatives, husband, wife, partner, father, mother, sister, brother, son or daughter. Former in these instances will mean one year prior to the date of application.  Are you, or anyone you are wishing to be rehoused with, an employee, Committee member or related to one of our employees or Committee  Yes  No  No  If yes, please give details below:				

Relationship: .....



#### **Declaration**

Before returning your completed form to us please read through the following statements, sign and date the boxes below to show you understand and agree with them.

- That I/we are 16 years of age or over and are eligible to apply for housing.
- That I/we will inform you immediately of any changes in my/our circumstances.
- That all the information given by me/us on this form is true. If I/we supply any false information or do not disclose any relevant information, my/our application may be cancelled.
- That if I/we are given a tenancy because I/we may have supplied knowingly or recklessly false information or I/we have kept back any relevant information, the tenancy may be ended.
- That I/we have read and understand the Fair Processing Notice provided which covers Data Protection legislation.
- That my/our current or previous landlords can be contacted for a reference.
- That I/we agree that the information provided in this application may be shared with other social landlords where I/we have indicated that we would accept a tenancy with another social landlord. In these instances, landlords who are partners in the Renfrewshire Common Allocation Policy reserve the right to apply the award given by the partner landlord you made your initial application with.
- That we may use this information to assess what help you may need to set up your newhome.
- That we may use the information you have provided to check with council departments and
  other agencies including health professionals, Police Scotland, social workers, social and
  private landlords, to make sure the information is accurate or to detect fraud or crime or to find
  out more information in relation to your application.

Your Signature	Date
Joint Applicant Signature	Date

#### **Common Housing Allocation Policy Partners**



Bridgewater Housing Association 1st Floor, Bridgewater Shopping Centre Erskine PA8 7AA www.bridgewaterha.org.uk

Tel: 0141 812 2237



Linstone Housing Association 17 Bridge Street Linwood Paisley PA3 3DB

www.linstone.co.uk Tel: 01505 382383



Paisley Housing Association 2 Lawn Street Paisley PA1 1HA

www.paisleyha.org.uk Tel: 0141 889 7105



Renfrewshire Council Contact Centres: 0300 300 0222 www.renfrewshire.gov.uk

Johnstone: Paisley:
Johnstone Town Hall, Renfrewshire
Church Street, House,

Johnstone, Cotton Street, PA5 8FA Paisley, PA1 1AN Renfrew: Housing Advice & 14 Renfield Street, Homeless service: 25 Renfrew, PA4 8RN 15 Abercorn Street

Paisley, PA3 4AA
Tel during office hours
0300 300 0222
Tel outwith office hours
0800 121 4466



Williamsburgh Housing Association Ralston House Cyril Street Paisley PA1 1RW

www.williamsburghha.co.uk

#### Other housing associations that have housing in Renfrewshire are:

Bield - provide housing for older people www.bield.co.uk
Cairn - provide housing for older people <u>www.cairnha.com</u>
Hanover - provide housing for older people <u>www.hsha.org.uk</u>
Horizon - provide housing for general need and also older and disabled people www.horizonhousing.org
Key - provide housing for disabled people <u>www.keyhousing.org</u>
<ul> <li>Link - provide housing for general need and also older and disabled people www.homehunt.info</li> </ul>
Loretto - provide housing for general need and also older and disabled people www.lorettoha.co.uk
Blackwood - provide housing for general need and also older and disabled people www.blackwoodgroup.org.uk
Sanctuary - provide housing for general need and supported accommodation www.sanctuary-group.co.uk
• Ferguslie Park – provide housing for general need <a href="http://fpha.org.uk/">http://fpha.org.uk/</a>



### Ralston House, Cyril Street, Paisley PA11RW www.williamsburghha.co.uk

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