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(Office use only)



**APPLICATION FOR CONFIRMATION
OF HOUSING QUALIFICATIONS
REGULATION 1(1)(f) - CONTINUOUS RESIDENCE
FOR THE PREVIOUS 10 YEARS TO DATE**

PLEASE ALLOW UP TO 2 WEEKS FOR THIS TO BE PROCESSED

In order to be granted any specific consent under the Housing (General Provisions) (Jersey) Regulations, 1970, as amended, it will be necessary for you to supply the following information and return it to the Population Office.

NAME: _____
(in full)

MAIDEN: _____ **DATE OF BIRTH:** _____
(**Please submit a copy of your marriage certificate where applicable)

ADDRESS: _____

DAYTIME TELEPHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____

DATE OF ARRIVAL: _____

INFORMATION REQUIRED:-

1. A "screen dump" from the Social Security Department detailing your employment history for the whole of the period, i.e. listing employers and respective periods of time for which contributions were paid. N.B You will require photographic identification to obtain this information from the Social Security Department. **Please note that this print out will not be proof of residency for any times that you have been self employed.**
2. Should your "screen dump" **not** be continuous, you will be required to provide written confirmation from independent reliable sources who can attest to their **certain knowledge and prove** that you have maintained continuous residence in Jersey for the previous 10 years to date.
3. A copy of your marriage certificate if applicable.

PLEASE NOTE:-

When attempting to gain written confirmation of residence, you should consider approaching employers, landlords or other persons who can prove your period of residence. Written confirmations from **landlords** and **employers** for verifiable dates of residence or employment are preferred as dates are usually provided from written records.

Personal references from family, relatives and friends are **not** acceptable and nor is a letter from your General Practitioner, unless you have consulted him or her very regularly, or he or she is also a personal friend.

It may be necessary for Social Security and/or Housing Department records to be checked in order to support your application and in signing below, I hereby give permission to the Department to obtain information from the both the Employment and Social Security Department and the Housing Department.

Signature:.....

Date:.....

When completed, this application should be forwarded with the relevant information attached to:-
Population Office, PO Box 843, Jubilee Wharf, 24 Esplanade, St Helier, Jersey JE4 0UT

"The information contained on this form is subject to the Data Protection (Jersey) Law, 2005. It is collected to administer the Housing (Jersey) Law, 1949, as amended. Any unauthorised use or disclosure is strictly prohibited".