Housing Allocations Service



Housing Declaration and Consent Form

Application No: Name: Address: Date of Birth:	
 I undertake to inform Milton Keynes Council of a as they take place 	ny changes in my circumstances as soon
 I understand that if I give any information that is offence and that legal action may be taken to bri eviction 	
 I give permission for information to be disclosed and other organisations, including the police and assessment, and nomination purposes 	•
 I give permission for Milton Keynes Council to co officer, community psychiatric nurse, or other sir order to assess my housing need 	
 I give permission for Milton Keynes Council to mand/or assess my housing registration application 	
If this is a joint application, both applicants must sign and date this form.	
Signature of Applicant	Signature of Joint Applicant
Print name	Print name

Date

Date