

COUNCIL OF THE ISLES OF SCILLY

Specific Local Need Application

Form B for Existing Residents

Privacy Notice

Under the General Data Protection Regulations (GDPR) as of 25th May 2018, the Council of the Isles of Scilly has a mandatory obligation to explain its Privacy Policy under a Privacy Notice of 'what', 'how', 'where', 'why' and 'when' we processes your personal data.

Who will control my data?

The Data Controller for all the information you provide on this form is the Council of the Isles of Scilly, Town Hall, St Mary's Isles of Scilly TR21 0LW. Data Protection Registration Number: **Z5715100**

There's something I don't understand?

If you need help in understanding or completing this form, please contact the Planning Department on 01720 424455 or by emailing Planning@scilly.gov.uk

How we will use the information about you?

The Council of the Isles of Scilly is required under Section 106 of the Town and Country Planning Act 1990 to ensure any property with a planning obligation in place is being occupied in accordance with the legal agreement entered into.

Who else will we share your information with?

We will only use this information in conjunction with your application to qualify as having a Specific Local Housing Need. This may include checks with the Council's Housing, Revenues and Water departments to identify any fraudulent claims.

Your data will be held within the Council of the Isles of Scilly secure network and premises and will not be processed outside of the EEA. Access to your information will only be made to authorised members of staff who are required to process it for the purposes outlined in this privacy notice. If you would like to find out more information about the Council's Data Protection Policy then you can read this here: http://scilly.gov.uk/sites/default/files/Data%20Protection%20Policy%20v1.0%20FINAL%20May%202018.p

How long will you keep this information for?

We will not retain any of the evidence provided. A copy of this application form will be retained for 2 years after 2 years it will be destroyed. If you are granted the status as having a Specific Local Need you will retain that status until such time as your circumstances change, the information you have provided to us on this application form will be deleted. You are advised to retain a copy of the Council's decision for your records. You will be recorded by name only in the register together with the outcome of your application.

What are my data rights?

Your personal information belongs to you and you have the right to:

- be informed of how we will process it
- request a copy of what we hold about you and in commonly used electronic format if you wish (if you provided this to us electronically for automated processing, we will return it in the same way)
- · have it amended if it's incorrect or incomplete

- have it deleted (where we do not have a legal requirement to retain it)
- withdraw your consent if you no longer wish us to process
- restrict how we process it
- object to us using it for marketing or research purposes
- object to us using it in relation to a legal task or in the exercise of an official authority
- request that a person reviews an automated decision where it has had an adverse effect on you

How do I exercise these rights?

If you would like to access any of the information we hold about you or have concerns regarding the way we have processed your information, please contact:

Simon Mansell
Data Protection Officer Council of the Isles of Scilly
C/O Information Governance
4th Floor, North Wing
County Hall
Truro
TR1 3AY

Tel: 01872 326424 Email: dpo@cornwall.gov.uk

I don't agree with something

We would prefer any complaints to be made to us initially at the Planning Department, Town Hall St Mary's, Isles of Scilly TR21 0NL so that we have the opportunity to see if we can put things right. However, if you are unhappy with the way we have processed your information or how we have responded to your request to exercise any of your rights in relation to your data, you can raise your concerns direct with the Information Commissioner's Office Tel No. 0303 123 1113 https://ico.org.uk/concerns/

Why do you need my information?

You have asked us to establish whether or not you would qualify to occupy a restricted occupancy home on the Isles of Scilly (Specific Local Need status) so we need your name, address and other details, as required, in order to assess whether or not you qualify with the requirements of the Interim Specific Local Need Policy. Without this information we are not able to confirm that you qualify to occupy a restricted occupancy home on the islands.

Specific Local Need Application

Form B for Existing Residents

Please fill out the details requested below and provide the evidence required for each section. The key for the letters in the evidence column is after the declaration section. If we need to write back to you to request further or missing information this may delay the consideration of your application. We aim to determine applications within 28 days of receipt.

Per	sona	al/Contact Details		Evidend	ce		
1		Title:					
2	Surname			_			
3	First Name Current Address			A			
4		our ent Address					
5	Email Address						
6	Telephone Number(s)						
7	Would the property (you are seeking to obtain this status for) be your sole private residence?		YES / NO	Declaration at form sign off			
Res	Residency Status						
8	Do you currently reside on the Islands?						
	8a If No, go to Application Form A or C you do not qualify under Criteria 3 of the interim policy						
	8b If Yes, go to question 9			А			
9	Have you lived on the Islands for a continuous period of 5 years up to the date of making this application?				0		
	9a If No, go to Application Form A or C you do not qualify under Criteria 3 of the interim policy						
	9b If Yes, go to Question 10						
10	As you are already living on the islands please tell us why do you need to move:						
	10a	Needing to vacate tied accord	mmodation?	YES / NO	С		
	10b		suitable accommodation due to medical or	YES / NO	D		

	10c	Needing to relocate to smaller/larg occupation?	er accom	modation due to	under/over-	YES / NO	Е
11	If you have lived at your current address for less than 5 years please provide the addresses of any properties you have occupied on the islands during the last 5 years (attach more sheets or extra rows as necessary)						
Add	Addresses Occupation Dates (from-to)						
				,		0	
						В	
12	The Address of the Property you are looking to occupy (if known):						
Dec	larati	on					
 You must sign the following declaration to: consent to the Council retaining your data. The information provided will be treated confidentially and used solely for the purpose of assessing your housing need, in accordance with the Privacy Notice set out above. To declare that all the information in this statement is accurate and complete and supported by the evidence required. It is accepted that if false information is deliberately provided this application will be rejected. Confirm that you understand and agree that the Council of the Isles of Scilly making make their own enquiries regarding the contents of this statement if reasonably required to assess this application. Declare that should your application be successful, the property you occupy would be your sole private residence. 							
Prin Nan							
Sigi	ned		Date:				

EVIDENCE

Please provide the evidence requested to back up the information provided above.

Evidence	Question No	Acceptable Evidence	Check to confirm included	Office Use: Documents have been seen
А	1-4 & 8b	Photographic ID such as a Passport/Driving Licence to prove who you are backed up by a Utility Bill/Voting Registration to confirm your current address.		
В	9b & 11	Utility Bills or any other proof you have to demonstrate occupation of accommodation on the islands for at least the past 5 years.		
С	10a	A letter from your landlord confirming your current accommodation and that a tenancy has ended or is due to end. Please provide the dates by which you have to vacate the property. Letters should have contact details so they can be checked.		
D	10b	A personal statement from the applicant confirming medical/mobility problems. This should also be supported by a letter or statement from a Doctor or other Medical professional confirming the need to relocate to more suitable accommodation. Letters should have contact details so they can be checked.		
E	10c	A personal statement made by the applicant explaining their change in family circumstances.		

INTERIM SPECIFIC LOCAL NEED CRITERIA FOR DWELLINGS RESTRICTED IN OCCUPANCY BY A SECTION 106 PLANNING OBLIGATION TO THOSE WITH A SPECIFIC LOCAL NEED AND THE OLD KEY WORKER CRITERIA

	Any home on the Isles of Scilly that is subject to an occupancy restriction, through a Section 106 Planning Obligation, including those relating to Specific Local Need and/or key Workers, will need to be occupied in perpetuity by a person or persons (and their dependants) with a proven housing need as their principal residence throughout the year. A proven housing need is where:	
1	the property would be their sole private residence; and	
2	they need to live permanently on the islands due to their employment circumstances and work commitments; or	
3	they have been continuously resident on the islands for at least five years and require new accommodation as a result of the requirement to:	
3a	vacate tied accommodation; or	
3b	relocate to more suitable accommodation due to a medical and/or mobility condition; or	
3c	relocate to smaller accommodation due to under- occupation; or	
4	they are a former resident who has previously lived permanently on the Isles of Scilly for a continuous period of at least 5 years and who:	
4a	has been away for educational, training purposes or to obtain work experience or professional or technical accreditation; or	
4b	is currently employed by the armed forces or merchant navy and whose main residence will be on the islands; or	
4c	is retired from the armed forces or merchant navy; or	
4d	needs to provide substantial care to a relative who has lived continuously on the islands for at least 5 years (substantial care means that identified as required by a medical doctor or relevant statutory support agency).	