

SHARED OWNERSHIP APPLICATION FORM

Please enter the details below. Required fields/sections are marked with a *.

Please send us any of the required documents along with your application to sales@vividhomes.co.uk

your application to <u>sales@</u>	vivianomes.c	. <u>O.uk</u>
e main/joint or both appl	icants.	
	Yes	
s know at <u>sales@vividhomes.co.uk</u>	if you have any d	ifficulty
x)?*	Yes [†]	No
K or abroad?* ds or mortgage,	Yes	No
m the property sale s nd mortgage ne'		
cess of coming as you're	Yes	No [†]
offer, eg. a letter from hat you're being coming rship is being transferred) I application form.		
	ship.	
	ed.	
Before you select a Newbuild development, please check if you require a local connection and only apply if you meet the criteria shown in the property listing. To find out which Local Authority you fall under enter		
your postcode at https://www.go	ov.uk/find-local-c	ouncil
for your chosen development, vising-list to join our mailing list to	sit https://yourviv hear about future	ridhome.co.uk/join-mail- Newbuild developments
2 bedroom house	3 bedroor	n house
	s know at sales@vividhomes.co.uk x)?* K or abroad?* ds or mortgage, the property sale and mortgage as you're offer, eg. a letter from hat you're being coming riship is being transferred) I application form. eligible to apply for Shared Owners may be eligible for. umstances and eligibility to proce Tell us which Newbuild de Resale property address Before you select a Newbuild de a local connection and only appl property listing. To find out which your postcode at https://www.ge If you don't see a property you li for your chosen development, vi ing-list to join our mailing list to	k know at sales@vividhomes.co.uk if you have any description of the property sale of the prop



Your contact details

Main applicant		Joint applicant	Joint applicant		
First name*		First name*	First name*		
Surname*		Surname*			
Email address*		Email address*			
Telephone number*	k	Telephone number*			
Date of birth*		Date of birth*			
		Date of Sitti			
Gender*		Gender*			
Male	Non-Binary	Male	Non-Binary		
Female	Prefer not to say	Female	Prefer not to say		
Other		Other			
		Connection to main applic	cant*		
Main applicant add	ress	Joint applicant address			
Addrocc*		Address*			
Address*		Address			
Address		Address			
Postcode*		Postcode*			
Postcode*		Postcode*			
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Postcode* Borough* Arun Bracknell Forest East Hampshire	Chichester Eastleigh	Postcode* Borough* Arun Bracknell Forest East Hampshire	Chichester Eastleigh		
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Previous address. Please provide minimum 3 years of addresses history if you need more space, please use additional paper and attach to the form.

Main applicant - previous address Address*		Main applicant - previo	us address		
Postcode*		Postcode*	Postcode*		
Borough* Arun Bracknell Forest East Hampshire Fareham Guildford Havant Portsmouth Rushmoor Surrey Heath Waverley Winchester Worthing Other	Basingstoke Chichester Eastleigh Gosport Hart New Forest Reading Southampton Test Valley West Berkshire Wokingham	Borough* Arun Bracknell Forest East Hampshire Fareham Guildford Havant Portsmouth Rushmoor Surrey Heath Waverley Winchester Worthing Other	Basingstoke Chichester Eastleigh Gosport Hart New Forest Reading Southampton Test Valley West Berkshire Wokingham		
		Hew long have you had	up at this address?*		
How long have you be	en at this address?*	How long have you bee	ii at tiiis addiess:		
Years Previous address. Please pro Tell us about you	en at this address?* Months vide minimum 3 years of addresses histor ur work connections	Years	Months		
Years Previous address. Please pro Tell us about you Main applicant Job Title*	Months vide minimum 3 years of addresses histor ur work connections	Years y if you need more space, please use ad	Months ditional paper and attach to the form.		
Years Previous address. Please pro Tell us about you Main applicant Job Title* Employers Name/Busi	Months vide minimum 3 years of addresses histor ur work connections	Years y if you need more space, please use add Joint applicant Job Title*	Months ditional paper and attach to the form.		
Years Previous address. Please pro	Months vide minimum 3 years of addresses histor ur work connections	Years y if you need more space, please use add Joint applicant Job Title* Employers Name/Busin	Months ditional paper and attach to the form.		

Years

Months

Months

Years



Who else is going to live with you in your new home?

Give details here of people who will be living with you, but v	vill not be jointly purchasing the property.
Person 1	Person 2
Age	Age
Connection to main applicant (eg. daughter/son)	Connection to main applicant (eg. daughter/son)
If you have additional people, please use additional paper and attach to the following	rm.
Your documents	
Please email us at sales@vividhomes.co.uk a copy of your particles to be a copy of your particles and the copy of your particles are sales are sales and the copy of your particles are sales are	assport (photo page) or photo driving licence for
If applicable, please check the terms of your visa to ensure the home in the UK. Please note: only JPEG, PNG, BMP, PDF form 10MB in size.	
Current housing situation This section applies to both single and joint applicants.	
Main applicant	Joint applicant
Are you:*	Are you:*
Home Owner/Shared Owner	Home Owner/Shared Owner
Privately Renting Renting from a housing association	Privately Renting Renting from a housing association
In armed forces accomodation	In armed forces accomodation
Homeless	Homeless
Living in lodgings - sharing facilities Living with parents/family	Living in lodgings - sharing facilities Living with parents/family
A couple more questions	
Do you currently live in a VIVID home?	
Main applicant	Joint applicant
Yes	Yes
No	□ No
Are you serving MOD operational staff/or left in last 2 years?	y*
You have completed basic (phase 1) training and are one of the following: Regular Clinical staff (with the exception of doctors and dentists); Ministry of Defence I	
Main applicant	Joint applicant
Yes	Yes
No	No
Please email us a copy of a valid MOD ID or copy of discharge	ne letter at sales@vividhomes co.uk



A couple more questions (continued) Do you have a parent, grandparent, child or sibling in the local authority area where you are applying* Main applicant Joint applicant Yes Yes No No If yes, which Local authority? Main applicant Joint applicant Basingstoke Arun Basingstoke Arun Bracknell Forest Chichester Bracknell Forest Chichester East Hampshire East Hampshire Eastleigh Eastleigh Fareham Gosport Fareham Gosport Guildford Guildford Hart Hart Havant New Forest Havant New Forest Portsmouth Reading Portsmouth Reading Rushmoor Rushmoor Southampton Southampton Surrey Heath Test Valley Surrey Heath Test Valley Waverley Waverley West Berkshire West Berkshire Winchester Wokingham Winchester Wokingham Worthing Worthing Other Other Does any member of your family have any legal or beneficial interest in VIVID, its members, employees, agents or consultants including any firm, partnership or organisations in which you or your family are involved in as partner, director or shareholder? Main applicant Joint applicant Yes Yes No No If yes, please give more details If yes, please give more details



Would you like to speak to us about possible ways we could adapt our service to support you during your application and purchase if you're successful?

You'd like to discuss if we're able to support you with corsuch as translation, visual or hearing needs?		nmunications,	Yes	No	
You'd like to discuss if we're able to support your mobilineg. before attending a viewing?		y needs,	Yes	No	
You'd like to give permission for another person, (who is applicant) to speak to us on your behalf, during your applicant purchase process if you're successful?			Yes	No	
Any other needs that you'd like us to consider if we can a support during your application and purchase?		ffer any possible	Yes	No	
Which of these marketing cha	annels led yo	ou to apply?			
VIVID Website VIVID Mailing List Email Received Internet Search Share to Buy Website	Rightmove W Zoopla Webs On The Marke On Developm An Event	ite	Social Media Online Advert Partner Estate A Word of Mouth Phone Message	gents	
Other					
Please note the following con	ditions				
The information given on this form must be true and you must tell VIVID of any changes that may occur, as this may affect the priority of your application. Any incorrect statement could cancel your application.					
Housing association, council or other public sector tenants must give up their existing rented home on the day of completion if buying a home through VIVID. VIVID will share information you provide us with our panel mortgage advisor and your appointed mortgage advisor (if different), as part of the financial assessment process relating to your application.					
VIVID may share the information you provide with other nearby local authorities, registered providers or any third party agent acting on behalf of VIVID. The information will only be used to assess whether you are eligible for Low-Cost-HomeOwnership schemes provided in these areas.					
You may be liable to prosecution, if you have given fa	alse information on thi	s form.			
By submitting this application form you are confirming you have read and understood the above conditions and have had access to VIVID's privacy notice.					
Where documents have been requested please ensure you send these to us by emailing sales@vividhomes.co.uk.					
Main applicant		Joint applicant			
		Signature / print na	amo to confirm*		
Signature / print name to confirm*		Signature / print no	arrie to commit		
Date*		Date*			