

Applying for housing with East Lothian Council



Title _____

Applicant Surname _____

Applicant First Name _____

Current Address _____

Post Code _____ Telephone No _____

If you do not want to be contacted at this address, please provide alternative.

IF YOU HAVE TO LEAVE OR ARE AT RISK OF LOSING YOUR CURRENT ACCOMMODATION, PLEASE CONTACT THE COUNCIL'S HOMELESSNESS UNIT ON 01620 827536 DURING OFFICE HOURS OR THE FREEPHONE NUMBER 0800 169 1611 (EMERGENCY)

IF YOU WOULD LIKE A HOUSING ADVICE INTERVIEW TO MAKE YOU AWARE OF ALL YOUR OPTIONS, PLEASE CONTACT YOUR LOCAL HOUSING OFFICER.

For Office Use Only

Application Type Transfer General

Application Date _____

Application Number _____

Processed by _____



East Lothian Council can provide council information in user friendly versions in other formats for example Braille, Large Print and Audio Tape. We can also provide signers and interpreters for council business. Phone 01620 827199 for more information.

NOTES

Please fill in this application to be considered for housing by East Lothian Council.
You can apply for housing in East Lothian if you are aged 16 or over.
Acceptance onto the housing list is not the same as being eligible for an offer of housing.

Our decisions about offering you housing depends on:

- The level of your housing need
- The availability of the sort of home you want in your area(s) of choice

ETHNIC ORIGIN TABLE

Please use this table to complete ethnic origin question on page 3.

CODE	ETHNIC ORIGIN	CODE	ETHNIC ORIGIN
01	White Scottish	10	Asian Scottish/British: Bangladeshi
02	White Other British	11	Asian Scottish/British: Chinese
03	White Irish	12	Asian Scottish/British: Other
04	White Other	13	Gypsy/Travellers
05	Black Scottish/British: African	14	Mixed
06	Black Scottish/British: Caribbean	15	Other
07	Black Scottish/British: Other	16	Not Known
08	Asian Scottish/British: Indian	17	I do not want to give this information
09	Asian Scottish/British: Pakistani		

Chinese

東路英荷郡議會可以使用你的語言提供服務使用者容易明白的資料。
我們可以為郡議會的服務提供翻譯。如果需要進一步的資料。
請電：01620 827199。

Bosnian

Vijeće za područje East Lothian-a u mogućnosti je pružiti Vam informacije na Vašem jeziku u pristupačnom i jednostavnom formatu. Osiguravamo usluge prevodioca za zdravstvo, školstvo, socijalni rad, i ostale vladine i lokalne službe. Za informacije molimo Vas obratite se na telefon: 01620 827199.

Albanian

Keshilli i East Lothian ju ofron informata ne gjuhen e juaj ne nje version te afert. Ne gjithashtu ofrojme perkthyes per punet e keshillit. Per informata me te shumta, ju lutem kontaktoni : 01620 827199.

Urdu

ایسٹ لوڈین کونسل آپ کو ایک آسان انداز میں آپ کی اپنی زبان میں معلومات فراہم کر سکتی ہے۔ ہم کونسل کے کام کیلئے
ایک مترجم کا انتظام بھی کر سکتے ہیں۔ مزید معلومات کیلئے برائے مہربانی رابطہ فرمائیں : 01620 827199

Punjabi

ਈسٹ لੋڈੀਅਨ کੌਂਸਲ ਤੁਹਾਡੀ ਬਾਸ਼ਨ ਵਿਚ ਸੌਖੇ ਢੰਗ ਵਾਲੀ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕਰ ਸਕਦੀ ਹੈ। ਕੌਂਸਲ ਦੇ ਕੰਮ
ਵਾਰ ਵਾਸਤੇ ਅਸੀਂ ਇੰਟਰਪਰੀਟਰ ਵੀ ਪ੍ਰਦਾਨ ਕਰ ਸਕਦੇ ਹਾਂ। ਹੋਰ ਜਾਣਕਾਰੀ ਲੈਣ ਲਈ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ
ਤੇ ਡਾਲ-ਐਲ ਕਰੋ: 01620 827199

Polish

Samorząd Regionu East Lothian dysponuje informacjami w
Twoim własnym języku. W razie potrzeby zapewniamy również
pomoc tłumaczy. Więcej informacji pod numerem:
01620 827199

ABOUT YOU

MAIN & ANY JOINT APPLICANT(S): PLEASE PROVIDE PROOF OF YOUR IDENTITY.

This can be a driving license, current passport or birth certificate.
(Original documents will be verified at the point of receipt and returned to you.)

MAIN APPLICANT * Denotes mandatory fields

Gender (Please tick) Male Female

*Date of Birth _____ *National Insurance Number _____

Mobile number _____ Email address _____

Ethnic Origin (Please choose from table on Page 2) _____

REASON FOR APPLYING

Why do you want to move from your present accommodation?

(If you are in danger of losing your home, please contact the Homelessness Unit on tel: 01620 827536 during office hours or the freephone number 0800 169 1611.)

- My mobility needs
- I feel isolated/lonely or insecure in my present home and feel I need to move
- I need to move closer to my family/carer
- I have been issued with a Notice to Quit home
- My present home is too small for my needs
- My present home is too large for my needs
- Other. Please state _____

Have you been assessed as requiring additional support to help you live independently?

- Yes No If yes, please give details below.

ABOUT WHERE YOU LIVE NOW

- Rent from East Lothian Council
 Owned or jointly owned house
 Rent from another Council
 Rent from Housing Association. Please specify _____
 Part own/part rent from housing association
 Living with parents
 House rented from Private Landlord
 Living with relatives/friends
 Living in Homeless Accommodation
 In HM Forces accommodation *Please complete Page 7*
 Living in tied accommodation *Please complete Page 7*
 No fixed abode *Please complete Page 11*
 In prison Please give expected release date _____
 Staying in hospital Please give discharge date _____

Please provide the name & address and telephone number for your current landlord

Please tell us the type of property you currently live in _____
 e.g. bungalow, ground floor flat, double storey etc

How many bedrooms does your current property have? _____

How many are used by you or your household exclusively? _____

Date you moved into present address _____

Do you have to leave your current address? if so when? _____

JOINT APPLICANT (If applicable) *Denotes mandatory fieldYour title Mr/ Mrs/Miss/MsGender Male FemaleRelationship to Main Applicant First name(s) Surname *Date of Birth *National Insurance Number Ethnic Origin (Please choose from table on page 2)

Present address (If different from Main)

Date you moved in Do you have to leave your current Address? If so when? Home Telephone Mobile number Email address How many bedrooms does your current property have? How many are used by your household exclusively?

YOUR HOUSEHOLD

Please list everyone who is living with you in your current accommodation (whether they are to be rehoused with your or not). Please also include any people who will live with you when you are rehoused - continue on a separate sheet if required.

You must provide proof of residency for those who are to be re-housed with you.

Full name _____	Date of birth _____
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to main applicant? _____
To be re housed <input type="checkbox"/> Yes <input type="checkbox"/> No	Living with you now <input type="checkbox"/> Yes <input type="checkbox"/> No
Date moved in _____	

Full name _____	Date of birth _____
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to main applicant? _____
To be re housed <input type="checkbox"/> Yes <input type="checkbox"/> No	Living with you now <input type="checkbox"/> Yes <input type="checkbox"/> No
Date moved in _____	

Full name _____	Date of birth _____
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to main applicant? _____
To be re housed <input type="checkbox"/> Yes <input type="checkbox"/> No	Living with you now <input type="checkbox"/> Yes <input type="checkbox"/> No
Date moved in _____	

Full name _____	Date of birth _____
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to main applicant? _____
To be re housed <input type="checkbox"/> Yes <input type="checkbox"/> No	Living with you now <input type="checkbox"/> Yes <input type="checkbox"/> No
Date moved in _____	

NON RESIDENT CHILDREN

If you have included children who don't usually live with you but you have overnight access arrangements, please supply details below.

Name of child / Date of birth	Name of person they currently reside with	Address of person they currently reside with
		<hr/> <hr/>
		<hr/> <hr/>
		<hr/> <hr/>
		<hr/> <hr/>

Please provide written proof of access arrangements. This can be in the form of a written agreement from either a solicitor or the child's main guardian. We may verify this information with the provider.

Are you or anyone moving with you pregnant? Yes No

If yes, name of person who is pregnant and their due date

Full name _____ Due date _____

Please provide confirmation of pregnancy. This can be in the form of a scan photo or a copy of your MAT B1.

OTHER HOUSING OPTIONS

Choice of housing providers: (Please tick those you would consider)

Council Housing association

Are you interested in any of the following?

Shared Ownership

Owner Occupation

Private Renting

If you are a Council or housing association tenant, would you like to consider a mutual exchange? Yes No

To register to swap your home with another tenant, please visit www.eastlothian.gov.uk or contact your local housing office (see back cover for details).

HM FORCES APPLICANTS

Do you live in Forces Accommodation? Yes No

Date of enlistment? _____

When will you be discharged from duty? _____

Please provide written confirmation of your enlistment and a copy of your Certificate of Cessation.

TIED APPLICANTS (Applicants who live in property provided by their employer)

Do you need to leave your tied tenancy? Yes No

Termination date _____

What is the name and address of your employer? _____

Employment start date _____

FOR APPLICANTS LIVING OUTWITH EAST LOTHIAN

If you live outside East Lothian, please tell us why you wish to move (tick where applicable).

- Do you wish to move to be nearer a relative or carer?
- Do you have a special social or medical reason to move?
- Are you experiencing harassment or domestic violence?
- You are currently employed or have been offered employment in the area
- Other

Do you wish to move to seek employment? Yes No

Please provide details below i.e. employers details/start date or family/carer name, address and telephone number. Please note that you will be asked to provide proof of the above.

Details e.g. employer, relative or family member, carer	
Address	
Telephone No.	
Start date, if employed	

BEDROOM REQUIREMENTS

Allocation of certain house sizes is dependent on how many people are on your application.

How many bedrooms do you need? _____

SHARED ACCOMMODATION

If you live in a shared or temporary accommodation at present, do you have: (please tick)

- Sole use of facilities (a bathroom and kitchen)
 - Share other facilities
 - A shared bedroom and shared facilities
 - Sole use of a bedroom
-

REASONS FOR LEAVING YOUR CURRENT ACCOMMODATION

If you are a private rented tenant, do you have a Notice To Quit and an AT6 Form ?
Please provide copies.

Have you contacted the Council's Homelessness Unit for assistance? Yes No

If yes, when? _____

Was an assessment carried out? Yes No

Do you have to leave your accommodation because of a relationship breakdown with:

Parents Relatives/friends Spouse / partner

Please provide details if you have been asked to leave your accommodation because:

- You are in mortgage default
- You are in rent arrears
- Sale of the matrimonial home
- Other

Applicants who are homeless or threatened with homelessness should contact East Lothian Council's Homelessness Unit for advice on 01620 827536 during office hours or 0800 169 1611 (emergency).

FACILITIES IN YOUR CURRENT HOME

Do you lack any of the following facilities in your home?

- Mains electricity
 - Toilet
 - Hot water
 - Bath/shower
 - Kitchen/cooking facilities
 - Mains piped water inside
-

TWO TENANCIES FOR ONE

East Lothian Council can award extra points to Council tenants who currently live separately but wish to be housed together in the future. This is known as 'Two Tenancies for One'. If you wish to apply, please give details of the other tenant.

Name _____

Address _____

Name of landlord _____

ADDITIONAL PROPERTY DETAILS

Provide details of any other property that you or any member of your household own or part own.

HEALTH AND WELLBEING -

About your household's health and wellbeing.

Do you feel that your current house is unsuitable for you or anyone who will be moving in with you because of your/their health condition/disability?

Yes No

(If yes, please ask to speak to your Community Housing Officer about applying for a Health & Housing award - you will need to complete a further application form)

If yes, please give name of person with health condition/disability and brief details

HARASSMENT

Are you or anyone in your household experiencing harassment, abuse or violence in your home?

Yes No

Please give brief details

WHERE YOU'D LIKE TO STAY

We can give you advice and information on:

- Which areas to choose
- Where we have housing stock and turnover
- Which areas you are most likely to get housed in due to higher turnover

Please contact us on 01620 827827 and ask for your local housing office.

There are no restrictions on the number of areas you can select, however, please note that the more areas you choose will increase your opportunities for housing. Fewer areas will mean that you will have to wait much longer for housing.

Haddington Town

- Amisfield
- Haddington Centre
- Haddington East
- Haddington West

Haddington Villages

- Athelstaneford
- Bolton
- East Fortune
- Garvald
- Gifford
- Morham

Prestonpans Town

- Prestongrange
- Burgh
- Polwarth
- Preston

Prestonpans Villages

- Cockenzie
- Port Seton East
- Port Seton West
- Longniddry

Dunbar Town

- Dunbar Centre
- Wingate
- Belhaven
- Ashfield

Dunbar Villages

- East Linton
- Innerwick
- Spott
- Stenton
- Whitekirk
- West Barns

Musselburgh Town

- Fisherrow
- Musselburgh Central
- Pinkie
- Stoneybank & Eskview
- Wimpey
- Windsor Park

Musselburgh Villages

- Oldcraighall
- Whitecraig & Deantown
- Wallyford

Tranent Town

- Balfour Area
- Harkness Crescent Area
- Muirpark Area
- John Crescent Area

Tranent Villages

- Elphinstone
- Gilchriston
- Gladsmuir
- Glenkinchie
- Humbie and Upperkeith
- East Saltoun
- Macmerry
- New Winton
- Ormiston
- Pencaitland

North Berwick Town

North Berwick Villages

- Gullane
 - Kingston
 - Aberlady
 - Dirlerton
 - Drem
-

SHELTERED HOUSING

Sheltered Housing is available throughout the district, normally to those aged 60 or over, but some complexes may consider those aged 55 or over. *(Please tick)*

HADDINGTON AREA

- | | | |
|--------------------------|--------------|--|
| <input type="checkbox"/> | The Butts | <i>Bield Housing Association</i> |
| <input type="checkbox"/> | Market Court | <i>Castle Rock Edinvar Housing Association</i> |

MUSSELBURGH AREA

- | | | |
|--------------------------|-----------------|----------------------------------|
| <input type="checkbox"/> | Mansfield Court | <i>East Lothian Council</i> |
| <input type="checkbox"/> | Brunton Court | <i>East Lothian Council</i> |
| <input type="checkbox"/> | Maxwell Court | <i>Bield Housing Association</i> |
| <input type="checkbox"/> | Campie Court | <i>Bield Housing Association</i> |

TRANENT AREA

- | | | |
|--------------------------|-----------------------|--|
| <input type="checkbox"/> | Wellwynd, Loch Square | <i>East Lothian Council</i> |
| <input type="checkbox"/> | Muirpark Gardens | <i>Castle Rock Edinvar Housing Association</i> |

PRESTONPANS AREA

- | | | |
|--------------------------|---------------------------|---|
| <input type="checkbox"/> | Winton Court, Cockenzie | <i>East Lothian Council</i> |
| <input type="checkbox"/> | Osbourne Court, Cockenzie | <i>East Lothian Housing Association</i> |

DUNBAR AREA

- | | | |
|--------------------------|------------------|--|
| <input type="checkbox"/> | Southfield Court | <i>Bield Housing Association</i> |
| <input type="checkbox"/> | Letham Gardens | <i>Castle Rock Edinvar Housing Association</i> |

NORTH BERWICK AREA

- | | | |
|--------------------------|----------------|--|
| <input type="checkbox"/> | Dirleton Court | <i>Castle Rock Edinvar Housing Association</i> |
|--------------------------|----------------|--|

VERY SHELTERED HOUSING

- | | | |
|--------------------------|--------------------------------|----------------------------------|
| <input type="checkbox"/> | Johnny Moat Place, Prestonpans | <i>Bield Housing Association</i> |
|--------------------------|--------------------------------|----------------------------------|

AREA PREFERENCES

Please provide details of which towns you would prefer on order of preference. This information is also used to identify areas of housing demand.

The council cannot guarantee that you will receive an offer in your first area of choice.

1st _____

2nd _____

3rd _____

HOUSE TYPE

In accordance with our Allocations Policy - Specialist Property Group, please note that in most cases applicants who have high medical needs will be considered for amenity, bungalow or ground floor accommodation ahead of other applicants. In addition, those with assessed mobility needs will be considered in the first instance for all suitable ground floor property.

By choosing only a particular house type you will be limiting your housing options.

I/we wish to be considered for:

- | | |
|---|---|
| <input type="checkbox"/> Bungalow | <input type="checkbox"/> Double/two storey house |
| <input type="checkbox"/> Tenement Ground | <input type="checkbox"/> Tenement Upper |
| <input type="checkbox"/> Four in Block Ground | <input type="checkbox"/> Four in Block Upper |
| <input type="checkbox"/> Maisonette | <input type="checkbox"/> Upper Amenity housing (for older people) |
| <input type="checkbox"/> Lower Amenity housing (for older people) | <input type="checkbox"/> Sheltered Housing |
| <input type="checkbox"/> Wheelchair Accessible housing | |

- In some parts of the district, **Studio Flat** accommodation may be available to single applicants; do you wish to be considered for this?

(Your existing application can remain active on the housing list for a one bedroom property if you are offered and accept a studio flat).

MAIN APPLICANT - HOUSING HISTORY (NOT YOUR PRESENT ADDRESS)

You must provide details of any other addresses that you have lived at during the past five years. If you are a Council/housing association or private tenant, you must provide your landlord's contact details below. We will contact your landlord to request references to support your application for housing.

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

JOINT APPLICANT - HOUSING HISTORY (NOT YOUR PRESENT ADDRESS)

Please give details of any other addresses that you have lived at during the past five years. If you are a Council/housing association or private tenant, you must provide your landlord's contact details below. We will contact your landlord to request references to support your application for housing.

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

Address	_____
Dates: From	_____ to _____
Name and address of landlord	_____ _____
Were you the tenant, owner, lodger or household member?	_____
Reason for leaving?	_____

RENT ARREARS

Do you or the joint applicant have any rent arrears or housing related debt with your current or any previous landlord? Yes No

If yes, type of arrears? e.g. Rent, Council Tax, Recharges? Amount _____

Name of Landlord _____

Address _____

Can you explain why these arrears have occurred? _____

Do you have an agreement with your landlord to pay off your arrears? Yes No

If no, why not? _____

If yes, how long has this been in place? _____

Are you able to continue to make these payments? Yes No

If you would like information on the Housing Benefit / Council Tax Reduction Scheme, please contact 01620 827827

MORTGAGE ARREARS

Do you or the joint applicant have any outstanding mortgage arrears? Yes No

Name of lender _____

Can you explain why the arrears have occurred?

DECLARATION – ALL QUESTIONS MUST BE ANSWERED

Both main and joint applicants must sign to declare that they have read and understand the following statements and that the information provided in this application form is correct.

Under the Housing (Scotland) Act 2001 and the Asylum and Immigration Act 1999, Councils are required to establish whether a person qualifies for public assistance, including housing.

Are you a UK citizen? Yes No

If **no**, you must complete the following questions

Do you have indefinite or exceptional leave to remain in the UK? Yes No

If **yes**, please provide evidence.

Do you have any restrictions on your status that prevents you from accessing public funds? Yes No

You must provide evidence to support your application.

Related to Councillor or East Lothian Council member of staff

If you are related to a Councillor or if you or a member of your family currently work for East Lothian Council, please give details

Name _____

Department _____

Position _____

Relationship to you _____

ANTI-SOCIAL BEHAVIOUR

Have you or a member of your family moving with you ever had action taken against you/them for Anti Social Behaviour Yes No

If yes, please provide person's name and relationship to main applicant.

SEX OFFENDERS

Are you or anyone on your application required to register with the police under the Sex Offenders Act 1977? Yes No

Name on Sex Offenders Register _____

INFORMATION PROVISION

I/we agree that I/we have provided true information.

I/we are aware that if I/we deliberately withhold information or give false information, this application may be cancelled.

I/we agree to tell East Lothian Council about any changes in my/our circumstances that may have an impact on my/our housing need. I/we understand that any failure to do so may result in an offer being made that is no longer appropriate to your circumstances. However, this will count as a reasonable offer if the local area office was not informed of the change.

I/we agree that East Lothian Council may contact my/our current or previous landlord(s) for a housing reference.

I/we agree that East Lothian Council may contact my/our doctor, health care professional, social worker or any other relevant person and ask them to provide further information regarding my/our housing application and/or support needs.

I/we agree that should I/we fail to respond to the regular review of the housing list, my/our application will be removed or cancelled.

I/we understand that any offer of housing may be withdrawn or the tenancy ended if I/we have withheld or supplied false or misleading information.

PLEASE REMEMBER TO SIGN THE DECLARATION ON PAGE 22

ONE COUNCIL

I understand that East Lothian Council aims to provide a good quality service to me and all its customers to help ensure our safety and well-being. To assist East Lothian Council staff to deliver the best service possible I agree to my personal details being shared between relevant services within the Council. These services may include Housing and Environment, Adult Wellbeing, Children's Wellbeing, Finance and Education.

GUIDANCE ON THE DATA PROTECTION ACT 1998

Access to Personal Files (Housing) (Scotland) Regulations 1992

We will treat any information you provide as confidential, and only those who need to know will have access to your information. You will have access to information you provide in accordance with Data Protection and Access to Personal Files legislation. We will make arrangements to prevent unauthorised access to your records.

As we need to investigate your application, we need your permission to contact the people who can/or will be able to confirm your details. This will be carried out in accordance with the above legislation.

Please note that without this information, we will be unable to complete our enquiries into your circumstances and would be unable to fully consider your application.

AGREEMENT TO ALLOW SHARING OF INFORMATION

To whom it may concern:

I/we authorise you to pass on to East Lothian Council, all relevant information requested by them in connection with my application for housing. I am/we are aware that the Council may have to disclose relevant aspects of my housing application to gain this information

PLEASE SIGN BELOW TO CONFIRM THAT YOU HAVE READ AND UNDERSTOOD THE PREVIOUS STATEMENTS AND DECLARATIONS. IF THIS FORM IS NOT FULLY COMPLETED AND SIGNED IT WILL NOT BE ACCEPTED AND WILL BE RETURNED FOR YOUR COMPLETION.

Signature of applicant _____

Signature of joint applicant _____

Date _____

HAVE YOU INCLUDED THE REQUIRED SUPPORTING DOCUMENTATION?

APPEALS AND FEEDBACK

If you wish to appeal against a decision made by East Lothian Council's Community Housing Service, please request an appeals leaflet for further information. This leaflet is available from your local area housing office.

Comments, complaints and suggestions about Council Services

If you want to make a comment, suggestion or complaint about a council service, you can pick up a Freepost Feedback form from your local council office, library or community centre. You can also contact us online through our website www.eastlothian.gov.uk, or you can contact our Customer Feedback Team directly on Tel: 0131 653 5290; email: feedback@eastlothian.gov.uk.

The Feedback form and website tells you how to make a complaint if you are unhappy about an action or lack of action by the Council, or the standard of service you have received. There is also information on the complaints handling procedure we have in place, as well as who you can contact if you remain unhappy after the complaints procedure has been completed. If you want to talk to someone about making a complaint, our Customer Feedback Team would be happy to chat things through.

If you want to make a complaint about a registered care service, you can also contact the Care Inspectorate directly:

Care Inspectorate
Compass House
11 Riverside Drive
Dundee DD1 4NY

Telephone: 0845 6009527
E-mail: enquiries@careinspectorate.com

You can also take your complaint to the Scottish Public Services Ombudsman, although it is usually better to use the Council's complaints procedure first. You should contact the Ombudsman within 12 months of the date that you first noticed the problem you are complaining about. In special circumstances, the Ombudsman may be prepared to deal with matters that have gone on longer than 12 months.

Please write to the

Scottish Public Services Ombudsman
FREEPOST EH641
Edinburgh, EH3 0BR

Telephone: 0800 377 7330
E-Mail: www.spso.org.uk/online-contact

Applying for housing with East Lothian Council

If you would like further information or assistance,
please contact one of the area offices below.

AREA OFFICES Tel: 01620 827827

Musselburgh Area

Brunton Hall
Ladywell Way
Musselburgh
EH21 6AF
housingmusselburgh@eastlothian.gov.uk

East Area – Dunbar Office

Bleachingfield Centre
Countess Crescent
Dunbar
EH42 1DX
housingdunbar@eastlothian.gov.uk

East Area – Haddington Office

John Muir House
Brewery Park
Haddington
EH41 3HA
housinghaddington@eastlothian.gov.uk

Prestonpans Area

Aldhammer House
High Street
Prestonpans
EH32 9SH
housingprestonpans@eastlothian.gov.uk

East Area – North Berwick

North Berwick Library
School Road
North Berwick EH39 4JU
housingnorthberwick@eastlothian.gov.uk

Tranent Area

The George Johnstone Centre
35 Winton Place
Tranent
EH33 1AE
housingtranent@eastlothian.gov.uk

HOMELESSNESS

Brunton Hall
Ladywell Way
Musselburgh
EH21 6AF
homelessness@eastlothian.gov.uk

Tel: 01620 827536 during office hours
Tel: 0800 169 1611 (emergency)

