**FORM 2: Declaration – Discount Market Sale Property Eligibility**

*For completion by a Conveyancer*

To: Strategic Housing ([strategic.housing@baberghmidsuffolk.gov.uk](mailto:strategic.housing@baberghmidsuffolk.gov.uk))

**Relating to the property known as: [insert full address…………………………………………..] “the Property” [Land Registry Title Number SK…………].**

Please answer all the questions below accurately and sign the declaration at the end of the document.

**Affordable Housing Need**

On behalf of my client/s……………………………………………………………………………………………………………………………………………………………………………………………..I confirm that:

1. My client/s gross household income does not exceed eighty thousand pounds (£80,000) per annum for single or joint purchasers.

The joint gross earnings of our household is £\_\_\_\_\_\_\_\_\_\_\_\_ and this has been verified by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert the name of the Financial Advisor who has verified this).

1. I confirm that my client/s are unable to afford a suitably market property in the area, as measured by the following calculation:

|  |  |
| --- | --- |
| For single purchasers: | For joint purchasers: |
| 1. Gross Annual Income multiplied by 4 = | a) Gross Annual Income multiplied by 3.5 = |
| 1. Deposit = | b) Deposit = |
| Add together parts a) and b).  £­­­­\_\_\_\_\_\_\_  The result must be less than the Open Market Value of the property being purchased (£\_\_\_\_\_\_) or a suitable property in the same area. | |

1. I confirm that my client/s total savings do not exceed 65% of the purchase price of £\_\_\_\_\_\_\_ , and this has been verified by the following Independent Financial Advisor; \_\_\_\_\_\_\_\_\_\_
2. I confirm that my client/s do not have an interest in another property in the UK and abroad (including, but not limited to shares, registered title or mortgage).
3. My client/s agree that the above information and supporting evidence can be passed to Babergh and Mid Suffolk District Councils if required for further clarifications.

**Local Connection Criteria (change in accordance with the s106/DoV)**

I confirm that my client/s have a local connection to Babergh/Mid Suffolk\* in one of the following ways, and I have seen evidence as set out in the box below.

Please tick at least one box [usually only one connection is required to prove the local connection]

|  |  |  |
| --- | --- | --- |
| **Tick** | **Local Connection** | **Evidence** |
|  | Buyer/s currently have only or principal home in the district of Babergh/Mid Suffolk\* and have lived there for at least two (2) years. | - Utility bills covering the whole period  - Evidence from the electoral register  - Council tax records |
|  | Buyer/s have a member of their household who has a parent, adult child, brother or sister whose only or principal home is in Babergh/Mid Suffolk\* and has been for at least two (2) years. | -Details of immediate family, i.e. name, address and relationship to applicant/s  -Evidence that the relative lives at the given address for the requisite time  -Council tax records. |
|  | Buyer/s are employed in the district of Babergh/Mid Suffolk\* at the date of this application and have been continuously so employed for two (2) years. | -Payslips  -Letter from employer |
|  | Buyer/s previously lived in the district of Babergh/Mid Suffolk\* and were resident in the area for either:   1. Six (6) of the previous twelve (12) months   Or   1. Three (3) of the previous five (5) years | - Utility bills covering the whole period  - Evidence from the electoral register  - Council tax records |
|  | Buyer/s requires substantial care from a relative who has lived in the District of Babergh/Mid Suffolk\* for at least the last six months  Or needs to provide substantial care to a relative who has lived in the District of Babergh/Mid Suffolk\* for at least six months | -Details of the relative, i.e. name, address and relationship to applicant/s  -Evidence that the relative lives at the given address for the requisite time  -Council tax records.  - Evidence of substantial care need. |

\*As relevant. The local connection needs to be to the District in which the property is located. A property in Babergh requires a local connection to Babergh, not Mid Suffolk, and vice versa.

**Declaration**

Signed by Buyer’s Conveyancer : …………………………………………..

Title/Position : …………………………………………

Full name of Conveyancer :…………………………………………

Date: …………………………………………………….

[Please print on headed paper or insert details below:]

Firm Name & Address:…………………………………………………

Contact details: Telephone number …………………

Email address: …………………………