



MINISTRY OF HOUSING AND URBAN DEVELOPMENT

GOVERNMENT'S AIDED SELF-HELP HOUSING PROGRAMME

44-46 South Quay, Port of Spain (868) 623-HOME (4663) www.housing.gov.tt

APPLICATION FORM F1 - PERSONS WITH LAND

PLEASE COMPLETE FORM WITH BLACK OR BLUE INK AND IN BLOCK LETTERS

SECTION A - MAIN APPLICANT PERSONAL INFORMATION

Surname		First Name		Other	
ID Card No. (MUST be entered)		Driver's Permit No.	Passport No.	Birth Certificate PIN	

Date of Birth (MUST be entered)	Sex	TT Citizen	Have you been resident in T&T for the past 5 years?	Country of Birth
yyyy / mm / dd	M <input type="checkbox"/> F <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Email Address

Residential Address

Mailing Address (if different from above)

Telephone Numbers (Home) (Work) (Mobile)

Marital Status Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Common Law ☐

Occupation	Total Monthly Income (Gross)	If self employed, state total monthly earnings	Place of Employment (if Self Employed state field of business)
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Total Monthly Expenditure/Obligations

Are you or your spouse an owner or part owner of a house? Yes ☐ No ☐

Have you or your spouse ever been a recipient of any Government Housing Programme? Yes ☐ No ☐

If Yes, Please specify :

SECTION B - CO-APPLICANT PERSONAL INFORMATION (OPTIONAL)

Surname		First Name		Other	
ID Card No. (MUST be entered)		Driver's Permit No.	Passport No.	Birth Certificate PIN	

Date of Birth (MUST be entered)	Sex	TT Citizen	Have you been resident in T&T for the past 5 years?	Country of Birth
yyyy / mm / dd	M <input type="checkbox"/> F <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Email Address

Residential Address

Mailing Address (if different from above)

