



CUSTOMER ENQUIRY FORM

Customer Information	
Mr/Mrs/Miss/Ms	
First Name:	Surname:
Email:	
Tel:	Mobile:
Address:	
Postcode:	
How did you hear about us? <input type="radio"/> PPHT <input type="radio"/> Social Media <input type="radio"/> Website <input type="radio"/> Local Press/Advert <input type="radio"/> Signage <input type="radio"/> Other (Please state):	
Shared Ownership Eligibility (if applicable) <input type="radio"/> First Time Buyer <input type="radio"/> Household income below £80,000 <input type="radio"/> Not a current home owner	
General Requirements	Current Living Situation
Price Range: £ Bedrooms: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Property Type: <input type="radio"/> Apartment <input type="radio"/> Terrace/Semi <input type="radio"/> Townhouse <input type="radio"/> Detached Number of occupants: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Timescales: <input type="radio"/> ASAP <input type="radio"/> Under 3 months <input type="radio"/> 3-6 months <input type="radio"/> 6-12 months <input type="radio"/> Over 12 months <input type="radio"/> Unknown Sales Schemes: <input type="radio"/> Shared Ownership <input type="radio"/> Rent to Buy	<input type="radio"/> Local Authority Tenant <input type="radio"/> Private Tenant <input type="radio"/> Living with family/friends <input type="radio"/> I am an owner/occupier with: <input type="radio"/> A property to sell <input type="radio"/> An agreed sale <input type="radio"/> Existing shared owner <input type="radio"/> Other Have you served as a regular in the UK armed forces? <input type="radio"/> Yes <input type="radio"/> No Savings <input type="radio"/> I have no savings <input type="radio"/> I have £..... for a deposit

What knowledge did you have (if any) of Shared Ownership before?

Notes:

Would you like to receive marketing information in the future relating to other new developments in the area?
 Y/N
Date consent given:

Are you a member of PPHT Staff or Board Member?
 PPHT Staff Board Member N/A

Are you related to/have a close connection to a member of PPHT Staff or Board Member? PPHT Staff Board Member N/A
 If yes, please state their name:

* Please see code list below				
Age	Sex (M / F)	Economic Status	Ethnicity	Nationality

<p>Completed by:</p> <p>.....</p> <p>Date:</p>
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*CODE LIST		
Economic Status		
1. Full time employment (30hrs or more per week)	4. Job seeker	8. Unable to work because of long term sickness or disability
2. Part-time employment (less than 30hrs per week)	5. Retired	9. Child under 16
3. Government training / New deal	6. Not seeking work	10. Other adult
7. Full-time student		
Ethnic Group		
<i>A. White</i>	<i>C. Asian or Asian British</i>	<i>E. Chinese or other ethnic groups</i>
1. English, Scottish, Welsh, Northern Irish	9. Indian	16. Chinese
2. Irish	10. Pakistani	17. Arab
3. Gypsy, Irish Traveller	11. Bangladesh	18. Other
4. Other	12. Other	
<i>B. Mixed</i>	<i>D. Black, African, Caribbean or Black British</i>	<i>F. Refused</i>
5. White & Black Caribbean	13. Caribbean	19. Refused
6. White & Black African	14. African	
7. White & Asian	15. Other	
8. Other		
Nationality		
1. UK national resident in UK	9. Slovakia	<i>*Other EEA countries are: Austria, Belgium, Cyprus, Denmark, Finland, France, Germany, Greece, Iceland, Italy, Liechtenstein, Luxembourg, Malta, Netherlands, Norway, Portugal, Spain, Sweden and Switzerland</i>
2. UK national returning from residence overseas	10. Slovenia	
3. Czech Republic	11. Bulgaria	
4. Estonia	12. Romania	
5. Hungary	13. Croatia	
6. Latvia	14. Ireland	
7. Lithuania	15. Other EU Economic Area (EEA* country)	
8. Poland	16. Any other country	
	17. Refused	