1 Exchange Tower

Exchange Square

London

E14 9GE

Tel: 0300 111 3000

Fax: 0207 831 1942

Membership@Housing-Ombudsman.Org.UK

Info@Housing-Ombudsman.Org.UK

[WWW.Housing-Ombudsman.Org.UK](http://WWW.Housing-Ombudsman.Org.UK)

**Organisational details**

|  |
| --- |
| Organisation name |
| Address |
| Telephone |  |
| E-mail |  |
| Website address |  |
| Companies House company number (if applicable) |
| Social Media: e.g. Facebook page, Twitter handle |  |

**Other contact details we need**

|  |
| --- |
| CEO Details |
| Accounts Payable Telephone |  |
| Accounts Payable E-mail |  |
| Ombudsman’s liaison e.g. Customer Service/Complaints Manager (if applicable) |

**Information about housing stock**

|  |
| --- |
| Number of units held |
| Number of social housing units held |  |
| Other |  |

**Existing registrations**

|  |  |
| --- | --- |
| Are you registered with the HCA? | Yes [ ]  No [ ]  In process [ ]  |
| Another Ombudsman? |  |
| Any other organisation or group? |  |

|  |  |
| --- | --- |
| Yes [ ]   | No [ ]  |

**Agreements**

Agreement to being bound by The Housing Ombudsman [Scheme](http://iho.accordonline.co.uk/S200WebEntry/ViewPoReq.aspx)?

**Information related to complaints and processes**

|  |  |
| --- | --- |
| Yes [ ]   | No [ ]  |

Have you established and maintained a complaints procedure?

(If yes, please provide a copy of your complaints procedure and an example redacted complaint response)

Where is your complaints procedure made available to tenants? (Please provide supporting evidence)

|  |
| --- |
|  |

If your application is successful, how will you inform complainants of their right to bring complaints to the Ombudsman under the Scheme?

|  |
| --- |
|  |

|  |
| --- |
|  |

Date by which you will have completed this action?

How will you inform stakeholders of your membership of the Scheme, and make information about your membership available to those entitled to complain to the Ombudsman?

|  |
| --- |
|  |

|  |
| --- |
|  |

Date by which you will have completed this action?

Anything else you want to tell us about that you feel may be relevant to your application?

|  |
| --- |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Title:** | **Name:** | **Signature:** | **Date:** |

Once complete, please return this form by post or email to

Membership@housing-ombudsman.org.uk