



Have your say  
**Haringey**

It's time to talk about Tangmere.  
We would like to hear your views!

We know that Tangmere has a number of building issues and we want to work with you to identify solutions for your home and the block.

Your views are important, so for the first part of our consultation about the future of Tangmere, we want to know what you think about where you live. To help us collect this information, we have prepared this short survey for you to complete. Please complete and return this survey in the pre-paid envelope provided by:

**Monday, 28 July, 2014**

Your comments on this survey will be treated as confidential.

All completed surveys will be entered into a prize draw for £40 of Sainsbury's vouchers.

If you have any questions about this survey, please email [myquestion@homesforharingey.org](mailto:myquestion@homesforharingey.org) or call 020 8489 5321.

This consultation is carried out by Homes for Haringey on behalf of Haringey Council.

[www.homesforharingey.org/haveyoursay](http://www.homesforharingey.org/haveyoursay)  
[www.haringey.gov.uk](http://www.haringey.gov.uk)



Homes for Haringey

working together



Haringey Council

**About your household**

1. How many people live in your home? (Enter the number of each below):

Adults

Children (16 years old or under)

2. If you have children living with you, which school do they attend:

3. How many people over 16 who live in your home are (enter the number of each in the box):

In full-time education or training

Unemployed

Employed

Retired

4. Are you a (tick one only please):

Council tenant

Newlon tenant

Leaseholder

Private tenant

5. Do you or any member of your household have any specific housing needs because of a disability or mobility issue?

Yes

No

If 'yes', please give details:

**About your home**

6. Is the size of your home right for your family/you?

Yes  No  If 'no', tell us why not in box below:

7. To what extent do you agree with the following statements?

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree or disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
My home is maintained to a good standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe and secure in my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am happy with the quality of the communal garden space outside.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The poor design of my block encourages anti-social behaviour.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The ground level car park attracts anti-social behaviour / estate problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The poor structure/design of the block contributes to housing repair problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide more information to explain your choices above:

8. Have you experienced or seen any of the following? (please tick all that apply):

	<b>In your home</b>	<b>In your block (if not applicable please leave blank)</b>
Mould/condensation/damp	<input type="checkbox"/>	<input type="checkbox"/>
Pests/rodents	<input type="checkbox"/>	<input type="checkbox"/>
Leaks	<input type="checkbox"/>	<input type="checkbox"/>
Heating problems	<input type="checkbox"/>	<input type="checkbox"/>
Anti-social behaviour (such as crime/drugs/break-in/noise)	<input type="checkbox"/>	<input type="checkbox"/>
Drainage problems	<input type="checkbox"/>	<input type="checkbox"/>
	Entrance door not working	<input type="checkbox"/>
	Faulty lift	<input type="checkbox"/>
	Communal hallway doors vandalised	<input type="checkbox"/>
	Entrance door not working	<input type="checkbox"/>

Are there any other issues regarding your home or block you want to mention?

9. How could your block be improved?

10. How many vehicles are there in your household:

**The area where you live**

11. Place a tick against any statement that describes how you feel about the area where you live (please tick all that apply).

Better transport links are needed	<input type="checkbox"/>	I feel isolated	<input type="checkbox"/>
Better estate shops are needed	<input type="checkbox"/>	There is nothing here for young people	<input type="checkbox"/>
Better estate amenities are needed	<input type="checkbox"/>	There is not enough parking	<input type="checkbox"/>
I wish I could move	<input type="checkbox"/>	This area attracts unwelcome visitors	<input type="checkbox"/>
People here don't talk to each other	<input type="checkbox"/>	Crime is a problem	<input type="checkbox"/>
There is a good sense of community	<input type="checkbox"/>	Local shops and amenities are good	<input type="checkbox"/>
I like where I live	<input type="checkbox"/>	Estate amenities (such as doctors' surgeries) are good	<input type="checkbox"/>
This area is my home	<input type="checkbox"/>	There are sufficient open spaces and communal garden areas	<input type="checkbox"/>
There are good transport links	<input type="checkbox"/>	I use the community centre resources	<input type="checkbox"/>
There are good local schools	<input type="checkbox"/>	The diverse community works well together	<input type="checkbox"/>

**What would you do?**

12. What would you most like changed to your home and block?

13. Do you have any further comments or suggestions to make about your home or area?

**Get involved and keep in touch**

14. Would you like to help shape change in your area?

Yes

No

If yes, which of the following would you like to do (please tick all that apply?)

**Complete survey**

**Attend meetings**

**Be part of a focus group**

**Be a member of a steering group**

15. If you are intereted in attending meetings, focus groups or being a member of a steering group what time of day would be most convenient for you?

During the day

Evenings

Weekends

16. What is the best way to contact you?

Email

Phone

Letter

17. Do you have access to the internet at home?

Yes

No

18. If you require language translation, an interpreter, or documents in other formats please give details below:

**About you**

Name

Address

Phone number

Email address

16. How long have you lived at this address?

17. What is your ethnic origin?

**White**

British

Irish

Any other White background

**Mixed**

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background



## Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

## Black or Black British

- Caribbean
- African
- Any other Black background

## Chinese or other ethnic group

- Chinese
- Any other

## Any other origin

14. Do you consider yourself or any members of your household to have a disability?

Yes

No

## Thank you for your feedback.

Your information: giving your contact details is optional, but providing them will help us to keep you informed about the consultation process. We use the monitoring information to make sure we are considering all viewpoints.

Data protection: we will not process information for any other purpose other than that for which it was collected and we will not pass it on to third parties other than those delivering services on our behalf (without permission).