



# AFFORDABLE HOUSING APPLICATION FORM

Office Use Only

Date received:

Applicant No.

## **IMPORTANT**

This application form is for **Affordable Housing** with Housing Trust. It is **not an application form for General Social Housing**. If you wish to apply for Social Housing then please complete a *Housing Pathways Application for Housing Assistance*

**Please ensure the following information is attached when you lodge your application for Affordable Housing**

**PROOF OF INCOME**

Wages or Centrelink statement which shows ALL monies earned/received for all household members for a minimum 12 month period

**PROOF OF IDENTITY**

Please provide proof of identity for all household members, for eg drivers licence, birth certificates, or passport

**PROOF OF CURRENT ASSETS AND/OR DEBTS**

Please provide proof of any assets (eg. cash/savings, a share in property, a share in a business, other assets such as household goods, cars, boats etc) or debts, for eg bank statements

**CURRENT RENT RECEIPT**

Please provide a detailed rent receipt if applicable (eg copy of Residential Tenancy Agreement or detailed receipt with your landlords name, address and telephone number)

**RENTAL REFERENCE**

If you have a rental reference, please attach this

**PERSONAL REFERENCE**

If you have a personal reference, please attach this

**If Born Overseas**

**PROOF OF PERMANENT RESIDENCY**

e.g. passport, citizenship certificate

**If Aboriginal or Torres Strait Islander**

**CONFIRMATION OF ABORIGINALITY**

For e.g. letter from Lands Council

**Other**

**ADDITIONAL DOCUMENTATION**

e.g. medical reports, support letters, or information demonstrating your capacity to maintain a tenancy

Please ensure that every question is answered clearly and attach as much additional supporting documentation as possible outlining your situation to help us assess your application fairly.

Please print all answers clearly and circle or tick answers where appropriate.

## 1. DETAILS ABOUT ME

Last Name or Family Name

Given Names

Current Address

Contact Telephone Numbers  
Home:   
Mobile:

Email Address:

Date of Birth:

Are you a permanent resident or citizen of Australia?

Cultural Heritage/Background

Language spoken at home

Are you of Aboriginal or Torres Strait islander origin?

Do you have a car?

Do you have any pets?

Where would you like to live?

**2. DETAILS ABOUT OTHER PEOPLE WHO WILL BE LIVING WITH ME**

No	Surname	First Name	Relationship to you	Date of Birth	Gender (M/F)
1					
2					
3					
4					

**3. MY HOUSEHOLD INCOME**

Please attach copies of all income documents for all household members. Gross household income for the previous 12 months is required to assess eligibility for Affordable Housing.

No.	Name	Wages per fortnight	Pension/benefit per fortnight
1			
2			
3			
4			

**4. MY HOUSEHOLDS ASSETS**

Do you or any household members own or are purchasing a residential or commercial property?

Yes/No

Do you or any household member receive income from investments/shares/business income or other assets?

Yes/No

*Please attach all relevant details*

**5. MY CURRENT HOUSING CIRCUMSTANCES**

I am:

- Homeless
- Renting a house/unit privately
- Caravan Park
- Hotel/Boarding House
- Other \_\_\_\_\_
- Public Housing
- Community Housing
- Home Owner
- Staying with Family/Friends

I want to move because:

- My current housing is unaffordable and I am having difficulty paying the rent
- My current housing is affecting a medical condition that I have
- My current housing does not meet my needs or is too big for what I need
- I have been issued a notice to vacate my home
- I want to move closer to family or friends or a support service
- Other reason

## 6. MY PREVIOUS HOUSING

In the last 5 years, I have previously rented with:

- Private rental
- Housing NSW
- Community Housing (specify) \_\_\_\_\_
- Neither

Applicants for Affordable Housing must make arrangements to pay any outstanding debts to Housing NSW or another community housing provider, if applicable.

- I do not have any debts to Housing NSW or another Community Housing Provider
- I do have a debt but have made arrangements to pay back this debt
- I give permission for Housing Trust to contact Housing NSW and/or other Community Housing Providers to discuss my former tenancy and to confirm any debt repayments.

## 7. OTHER INFORMATION ABOUT ME & HOUSEHOLD MEMBERS

I have an ongoing medical condition that affects my housing needs

*(If yes, please provide details in relation to applicant or household members)*

Yes/No

I have a disability that affects my housing needs

*(If yes, please provide details in relation to applicant or household members)*

Yes/No

I have some specific property requirements (eg. wheelchair access, bathroom grab rails)

Yes/No

*(If yes, please provide details in relation to applicant or household members)*

I currently receive specialist or specific services because of a medical condition or disability (including NDIS packages)

*(If yes, please provide details in relation to applicant or household members)*

Name of service	Details of service provided

I require specialist or specific services to maintain an independent tenancy because of a medical condition or disability

*(If yes, please provide details in relation to applicant or household members)*

Name of service	Details of service provided

## 8. MY EMERGENCY CONTACTS

Emergency Contact (Name)

Relationship to you

Address

Emergency Contact (Number)

## 9. APPLICANT'S DECLARATION

### Notice and Declarations

Under the Housing Act 2001 a fine of up to \$2,200 and/or three months imprisonment applies for making a false statement or representation, or with the intention of retaining or continuing to obtain a benefit to which the person knows that they are not entitled, fail to notify Housing Trust of any relevant changes of circumstances, within 28 days of the change occurring. The Housing Trust may refuse further assistance or prosecute anyone who wilfully makes any false statements as a result of which they obtain accommodation or other financial benefit of any kind.

Housing Trust may formulate a policy for the granting of subsidies or the waiver of rents. In accordance with such policies, Housing Trust may grant a subsidy or waive rent in its absolute discretion.

### Declaration

- I authorise Housing Trust to confirm information provided by me with any third party and or any such third party to provide Housing Trust any relevant documentation or information sought by Housing Trust when determining or supporting this application.
- I understand the instructions given on this application form.
- To the best of my knowledge, the information provided in this form is correct.
- I understand that smoking is prohibited in all Affordable Housing properties and on common area grounds.
- I understand there are penalties for giving false or misleading information.
- I understand that I must notify Housing Trust with 28 days of any change in the income, assets and/or people in my household.

<b>Title</b>
<b>Last Name</b>
<b>First and middle name(s)</b>
<b>Signature</b>
<b>Date</b>

Is there another person helping you to fill out this form?

Yes	No
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If yes then please complete the Declaration below

**Declaration from the person assisting or completing this application on behalf of the tenant.**

- I have filled out this form on the basis of the information the tenant gave me.
- I have read out the form and the answers (including the section headed Notice and Declarations) to the tenant who seemed to understand them.
- I understand there are penalties for giving false or misleading information.

<b>Title</b>	
<b>Last Name</b>	
<b>First and middle name(s)</b>	
<b>Signature</b>	
<b>Date</b>	<b>Phone</b>

**Consent of additional persons**

Each additional person on the application AGED 16 YEARS AND OVER must provide their written permission for their personal information to be collected by the main applicant. To do this, they need to read the statement below and sign and date this form.

I give my permission for my personal information on this form to be collected by the main applicant the proper use of my personal information by Housing Trust in order to process this application.

Name	Signature	Date

**PRIVACY NOTICE**

Housing Trust is collecting personal information on this form to provide you with housing assistance. To assist you with your housing needs and services, relevant personal information may be disclosed to Housing Trust staff and partner organisations and agencies authorised by legislative provisions.

Limited personal information may be used by Housing Trust for housing related research, policy or planning functions. Unless authorised or required to by law, your personal information will not be passed on to any other third party without your consent.