

Please complete this application in full. Your application may be returned to you if these details are not supplied. **Please note that we do not offer emergency accommodation.**

1. Primary Applicant Details

Surname: Given Name:

Street Address:

Town/City: Postcode:

Home Telephone: Mobile:

Email Address:

Date of Birth: Gender:

ATSI: ☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander
☐ Neither

Residency: ☐ Australian Citizen
☐ Permanent Resident; Visa Class: Visa No:

Do you need an interpreter? ☐ No ☐ Yes; Preferred Language:

2. Secondary Contact

Name: Telephone:

Address:

3. Household Details

Where would you prefer to live?

- ☐ Port Macquarie ☐ Wauchope

Which of the following best describes your household?

- ☐ Single ☐ Partnered – no Children ☐ Unrelated adults – No children
☐ Sole parent with children ☐ Family with children ☐ Family with other non-related persons
☐ Other:

List all of the other members of your household here:

You must complete all of the details for us to successfully process your application.

Each person 16 years of age or over is required to provide proof of identity. (See information page).

1. Name: Gender:

Date of Birth: Relationship to the Applicant:

Marital Status: Country of Birth: % care of child:

2. Name:	<input type="text"/>	Gender:	<input type="text"/>
Date of Birth:	<input type="text"/>	Relationship to the Applicant:	<input type="text"/>
Marital Status:	<input type="text"/>	Country of Birth:	<input type="text"/> % care of child: <input type="text"/>

3. Name:	<input type="text"/>	Gender:	<input type="text"/>
Date of Birth:	<input type="text"/>	Relationship to the Applicant:	<input type="text"/>
Marital Status:	<input type="text"/>	Country of Birth:	<input type="text"/> % care of child: <input type="text"/>

4. Name:	<input type="text"/>	Gender:	<input type="text"/>
Date of Birth:	<input type="text"/>	Relationship to the Applicant:	<input type="text"/>
Marital Status:	<input type="text"/>	Country of Birth:	<input type="text"/> % care of child: <input type="text"/>

5. Name:	<input type="text"/>	Gender:	<input type="text"/>
Date of Birth:	<input type="text"/>	Relationship to the Applicant:	<input type="text"/>
Marital Status:	<input type="text"/>	Country of Birth:	<input type="text"/> % care of child: <input type="text"/>

- Is any person on the application expecting the birth of a child?
 - ☐ No ☐ Yes, please provide a letter from a doctor stating when the baby is due.
- Do you have full time care of your children?
 - ☐ Yes ☐ No, please provide documentation stating which children you DO NOT have full time care of, stating the percentage you do have.

4. Accommodation History

Please provide details of your accommodation history over the last 2 – 5 years.

1. Address:	<input type="text"/>		
Type of Accommodation:	<input type="text"/>	For how long?	<input type="text"/> Which year/s? <input type="text"/>
Reason for Leaving	<input type="text"/>		

2. Address:	<input type="text"/>		
Type of Accommodation:	<input type="text"/>	For how long?	<input type="text"/> Which year/s? <input type="text"/>
Reason for Leaving	<input type="text"/>		

3. Address:	<input type="text"/>		
Type of Accommodation:	<input type="text"/>	For how long?	<input type="text"/> Which year/s? <input type="text"/>
Reason for Leaving	<input type="text"/>		

Do you currently live, or have you ever lived, in a house owned or managed by social/affordable public housing?

☐ No ☐ Yes, complete the details below:

Address:

Dates:

From:

To:

Reason for Leaving:

5. Reference/s

Please provide one rental/housing referee:

Name:

Company:

Address:

Telephone:

Email:

6. Income Details

Please list each person in the household who receives an income of any type.

For non-Centrelink income, please provide three months' worth of pay slips or income statements.

Name:	Gross Payment (pre tax) amount per f/n:	Type of Income (e.g. wages, investments, Centrelink):	Employment Type:	Employer Details:

Bank Accounts: Every person aged 16 or over who has a bank account must provide a copy of a bank statement (not more than four weeks old) or current balance slip from an ATM or bank (with a copy of the card used for that account) for every account that the person holds.

7. Assets

Please provide documentation that supports the ownership and value items selected below. (e.g. car registration).

Motor Vehicle: ☐ Yes ☐ No

Caravan/mobile home: ☐ Yes ☐ No

Real Estate: ☐ Yes ☐ No

Recreation Vehicle ☐ Yes ☐ No

Accessible Superannuation: ☐ Yes ☐ No

Savings: ☐ Yes ☐ No

(e.g. boat)

Other bonds or investments: ☐ Yes ☐ No

Shares: ☐ Yes ☐ No

8. Other

Do you have any pets? ☐ No ☐ Yes, details:

Do you consent to a criminal history check? ☐ No ☐ Yes

9. Privacy, Confidentiality and Consent

By signing this form, you:

- Authorise St Agnes' Care and Lifestyle Community Housing to share non-identifiable information contained in this application with necessary partners.
- Authorise St Agnes' Care and Lifestyle Community Housing to obtain information about you that will assist in the assessment of your application form, including:
 - Your referee/s
 - Centrelink – to download your income statement on the internet to determine eligibility and calculate rent (if required).
 - National Tenancy database or your previous or current landlords.

Once you have read and understood this information please sign and date below. All household members aged 16 or over are required to sign:

Name:	Signature:	Date:

10. IMPORTANT INFORMATION

All relevant documentation must be provided with this application:

Proof of identity (including anyone in the house that is aged 16 and over).

- ☐ 2 documents with signatures (e.g. credit card, health care card).
- ☐ A single document which includes both a signature and a photo (e.g. driver's license, passport).
- ☐ 2 documents, one with signature and one with photograph.

Recognised aboriginality form (Aboriginal specific housing only)

- ☐ Provide a copy of the relevant certificate confirmed by a recognised Aboriginal or Torres Strait Islander organisation.

Asset Details

- ☐ Copies of the details relating to any assets and their worth (e.g. bank account statement).

Income Details

- ☐ Documentation showing three months' worth of pay slips.
- ☐ Income Statement showing previous months' worth of Centrelink income, including rent assistance.
- ☐ Superannuation or Workcover payments.

Child/ren Details

- ☐ If you have part time care of your child/ren please provide documentation demonstrating your percentage of care.
- ☐ If you are expecting a child, please provide a letter from a doctor for the expected date of birth.

Residency Status

- ☐ Please provide a copy of your residency status, including the visa class and number.

All information provided to St Agnes' Care and Lifestyle Community Housing will remain confidential and is needed to assess the household's eligibility and suitability for a rental property. The privacy of your information is also protected by law. We treat your information in the strictest of confidence and store it securely. Your information can be seen by the professionals in the service involved in assisting you. Otherwise we will only release information about you if you agree or if required by law.

After completing this application, please return all required documentation to:

In Person: Donnelly House
150 -152 Horton Street
Port Macquarie NSW 2444

Email: communityhousing@stagnesparish.org.au