

APPLICATION FOR ACCOMMODATION

Name of applicant: Date of birth:.....

Spouse /partner /joint applicant: Date of birth:.....

Present address: Phone:

Occupation:

Employer: Phone:

Address: Number of years:

Joint applicant's employer: Phone:

Address: Number of years:

Next of kin:

1. Name: Phone:

Address:

Relationship:

2. Name: Phone:

Address:

Relationship:

Residency

What country were you born in?

If not NZ, how long have you lived in NZ?

Family information: Provide details of all who will be living with you

First name **Family name** **Sex** **Date of birth.** **Relationship to you**

PLEASE NOTE:

- Only 1 & 2 bedroom units are in our portfolio;
- The 2 bedroom units are reserved for couples/spouses/joint applicants. If you are an individual please apply for a 1 bedroom unit;
- Should Urban Plus offer you a unit, you are allowed only one decline, otherwise on the second decline your application will be put to the back of the waiting list;
- Our units are for the low income elderly only (65+). However, we will consider from 55+;
- No animals are allowed in Urban Plus Accommodation;
- Smoking is not permitted inside the units.

I have read and understood the above information:

Signature/s: _____

How many bedrooms do you need?

Current accommodation information: (please tick) Renting Boarding Other

If other, please give details

How long have you stayed at this address?

How much rent/board do you pay per week? \$.....

Please give the name and address of the person you pay rent or board to:

Name: Phone:

Address:

Have you previously rented housing from Urban Plus? Yes No

If yes, when?

Address:

REFERENCES: Please supply two **written** character references from persons other than relatives:

1. Name: Phone:

Address:

2. Name: Phone:

Address:

FINANCIAL INFORMATION

PLEASE NOTE: ALL INFORMATION PROVIDED IN THIS SECTION IS CONFIDENTIAL

Earnings

<u>Weekly income after tax – both applicants</u>	\$
*delete where inapplicable	
Wages from all jobs/ACC
Benefit/allowance/accommodation supplement
Superannuation
Family support
Other income e.g. interest earned/child support (please specify
TOTAL	\$.....

Assets

Do you have cash in the bank? Yes No If yes, give details

.....
Do you own any property? Yes No If yes, give details

.....
Do you have investments? Yes No If yes, give details

.....
Do you have any debts? Yes No If yes, give details

PLEASE NOTE: It is Urban Plus policy to do a credit check on prospective tenants, and making this application constitutes an authority to do so.

HEALTH SECTION

PLEASE NOTE: ALL INFORMATION PROVIDED IN THIS SECTION IS CONFIDENTIAL

In order to accurately assess your housing needs, you must provide the following information, both in respect of you and any other person that will be living with you. You must provide supporting information from your doctor (medical certificate) or your support worker (if you have one). If you do not provide this information, your application for tenancy with urbanplus may be at risk.

Physical disabilities Yes No

If yes, give details

Psychiatric disabilities Yes No

If yes, give details

Intellectual disabilities Yes No

If yes, give details

Other disabilities Yes No

If yes, give details

After your application has been processed you will be given an interview time. Would you like your support worker to be present at this interview? Yes No

If no, please sign the following statement giving us permission to speak with your support worker before you are housed.

I give permission for Urban Plus to contact my support worker to discuss any matters that may impact upon my housing needs with urbanplus.

Signed Date

DECLARATION AND AUTHORISATION This must be completed by the applicant/s

I/we declare that the information contained in this application is true and correct to the best of my/our knowledge and acknowledge the right of Urban Plus Limited ("Urban Plus") to check the validity of the information supplied including medical information from my doctor or key worker if applicable. If misleading or false information is provided, this application may be cancelled.

Signed:

Applicant

.....

Spouse/Partner/Joint Applicant

Witnessed by:

Urban Plus Limited Housing Manager/Agent

.....

Date

CREDIT REPORT AUTHORISATION

As part of the process for approving your application we need to obtain a credit check from Veda Advantage.

To permit us to obtain that credit check we will require you to sign the form below.

I _____ understand that Urban Plus Limited, a subsidiary of the Hutt City Council, is asking for personal information about me and intends to apply to Veda Advantage credit reporting services for a credit check on me.

I understand:

- That Veda Advantage will give you information about me for that purpose;
- You will give personal information about me to Veda Advantage and that Veda Advantage will hold that information on their system and use it to provide credit reporting services. I recognise that the information that you typically provide to Veda Advantage consists of my full name, date of birth and address;
- When Veda Advantage customers use Veda Advantage credit reporting services Veda Advantage may give the information to those customers. If I default in my payment obligations to you information about that default may be given to Veda Advantage and Veda Advantage may give information about my default to other Veda Advantage customers;
- I have read and signed the privacy statement under the Privacy Act 1993 attached.

Signature/s: _____

Full Name/s: _____