

Application No.

Housing Act 2003 Application for housing assistance pursuant to

the *Housing Act 2003.*

**Application for Housing – Aged**

A range of houses are available within the Murweh Shire in the towns of Charleville and Augathella.

**Important information:**

Your eligibility for housing assistance will be assessed based on the information and the supporting documentation you provide with this application. If your circumstances change at any time notify Murweh Shire Council office within 28 days of the changes.

**Completing this form:**

Have you answered all the questions with a tick where there are Yes/No boxes – for example

Provided supporting documentation including proof of income and assets for each person detailed within this application. For example, Centrelink Income Statements etc.

Signed the declaration on the last page of this form

Have identification ready when you submit this application. You can submit witnessed copies of your identification if you are returning this application via mail

Had your application form sighted and witnessed. Details of who can witness your application are detailed on the last page of this form.



**What is your first spoken language?**

**If you speak in a language other than English.**

**Spoken language**

**Do you need assistance when making decisions?** *This may be a person that assists you to make decisions, or someone who makes decisions on your behalf in relation to your personal, lifestyle and/ or financial matters.*

### No Yes

**If yes, which of the following: Public Trustee**

**Public/Adult Guardian Family, Friend/s or Advocate Other**

#### If other, please provide details

**Household Contact Details**

**Name**

**Current address**

**Postcode**

**Mailing address as above or please detail below if different.**

**Postcode**

**Telephone Home Work**

**Mobile Email**

**Preferred contact method?** *Please tick all that apply.*

**Telephone Letter SMS Email**

### Alternative contact details

*Please provide the name and details of an alternative contact person the council could contact if they were unable to contact you directly. This may be a friend, relative or an organisation.*

**Person/organisation Address**

**Telephone Personal Work**

|  |
| --- |
| **Household member/s details** |
| **Household member 1** |
|  |
|  | **Relationship to Applicant:** | **Primary Applicant** |  |
|  | **Alias:***Any other names you may be known as* |  |  |
|  | **Date of birth:** |  |  |
|  | **Country of birth:** |  |  |
|  | **Gender:** |  |  |
|  | **Centrelink Reference Number (CRN):** |  |  |
|  | **Department of Veteran Affairs (DVA)****reference number:** |  |  |
|  | **Do you identify as:***Please tick all that apply* | **Aboriginal Torres Strait Islander Australian South Sea Islander****Another cultural or linguistic background None of the above** |  |
|  | **Citizenship /Residency Details:** | **Australian Citizen Permanent Resident Not a permanent resident** |  |
| **Other VISA** *if yes, what type?* |  |  |
|  | **Are you expecting a child:** | **Yes No***If yes, expected due date:* |  |
|  | **Do you have a disability or medical condition?** | **Yes No** *details* |  |
|  | **Income:***Amount and type (wages, pension, allowances, interest, superannuation)* | **$ frequency Type****$ frequency Type** |  |
|  | **Assets:***Managed investments, cash, deposits, property trusts, shares, bonds, debentures, superannuation- allocated pensions or lump sum payments, proceeds from property sale or share of property settlement* | **$ Type****$ Type** |  |
|  | **Do you own or part own any property either in Australia or overseas:***This could include residential, vacant land, industrial property, commercial property, live-abroad boat, cabin, donga, caravan or manufactured/ transportable home* | **Yes No** *If yes, what type:***Amount of Current value of Date of ownership Property owned property****e.g. 50%** |  |
|  | **Type of transport you use:** | **Public transport Own transport Other (e.g. family and friends)** |  |
|  |  |  |  |

|  |
| --- |
| **Household member 2** |
|  |
|  | **Name:** |  |  |
|  | **Alias:***Any other names you may be known as* |  |  |
|  | **Date of birth:** |  |  |
|  | **Country of birth:** |  |  |
|  | **Gender:** |  |  |
|  | **Relationship to Applicant:***Please tick one of the following* |  **Joint Applicant Spouse Dependent Resident** |  |
|  | **Centrelink Reference Number (CRN):** |  |  |
|  | **Department of Veteran Affairs (DVA)****reference number:** |  |  |
|  | **Do you identify as:***Please tick all that apply* | **Aboriginal Torres Strait Islander Australian South Sea Islander****Another cultural or linguistic background None of the above** |  |
|  | **Citizenship /Residency Details:** | **Australian Citizen Permanent Resident Not a permanent resident Other VISA** *if yes, what type?* |  |
|  | **Are you expecting a child:** | **Yes No***If yes, expected due date:* |  |
|  | **Do you have a disability or medical condition:** | **Yes No** *details* |  |
|  | **Income:***Amount and type (wages, pension, allowances, interest, superannuation)* | **$ frequency Type****$ frequency Type** |  |
|  | **Assets:***Managed investments, cash, deposits, property trusts, shares, bonds, debentures, superannuation- allocated pensions or lump sum payments, proceeds from property sale or share of property settlement* | **$ Type****$ Type** |  |
|  | **Do you own or part own any property either in Australia or overseas:***This could include residential, vacant land, industrial property, commercial property, live-abroad boat, cabin, donga, caravan or manufactured/**transportable home* | **Yes No** *If yes, what type:***Amount of Current value of Date of ownership Property owned property****e.g. 50%** |  |
|  | **Type of transport you use:** | **Public transport Own transport Other (e.g. family and friends)** |  |

**Current Housing**

**Is everybody listed on this application currently living with you? Yes No What best describes where the household is currently living?**

**Please advise why you need to move**

# Your well-being

## Have any of the following affected your ability to access stable housing?

You or a household member have

a permanent and significant disability

You have been evicted more than 2 times in the past 3 years for rent arrears, disruptive behaviour or property damage

There is no or a limited number of appropriate properties to meet your needs, example size, location or features that you need

|  |  |  |
| --- | --- | --- |
| **How much rent does the household currently pay per week?** |  |  |
| **Do you need disability/housing features for your home?** | **Yes** | **No** |
| *If yes, please provide details* |  |  |
|  |  |  |

## Do you currently have a pet/s? Yes No

*If yes, please provide details*

**Where do you want to live?**

**Charleville**

**Delta**

**Wildie**

**208 Alfred**

**Augathella**

 **Forest**

**29 Alfred**

**Cavanagh**

**Main**

***Note:*** *You will be offered housing from any of the area/s listed for.*

**What types of housing do you want to apply for?**

**Senior units** – are only available to applicants over 65 years of age and are usually in a complex of one storey, with one to two bedrooms each.

***Additional information you would like to provide:***

 ***Please supply two references:***

**Personal Information Privacy Notice**

The Murweh Shire Council is collecting personal information on this form to provide you with housing assistance application. This is authorised by the *Housing Act 2003.* To assist you with your housing needs and services, relevant personal information may, in very limited and specific circumstances, be disclosed to: partner agencies, service providers, agencies authorised by legislative provisions, and local governments and non-governmental agencies that now, or will provide you with housing and/ or support services. Limited personal information may be used for housing related research, policy or planning functions. Unless authorised or required by law, your personal information will not be passed on to any other third part without your consent.

## Declaration, Acknowledgement and Consent

**I understand:**

* the instructions given on this form and acknowledge the Privacy Notice above
* the information on this form will be used by the Murweh Shire Council to register my application for housing, providing I am eligible for it
* my personal information may be given to government and non-government organisations to provide me with housing and/or support services
* as the applicant/s, I must advise the council if my circumstances and those of any household members listed on the application change in a way that is relevant to my application for housing
* that I may become ineligible for housing assistance if changes occur to any of my, or members of my household’s circumstances and/or incomes and/or assets detailed in this application

Upon submitting my application, I understand that I have to provide at least one item from both the primary and secondary identification lists below as proof of my identity. One of which must show a Queensland address, the applicant’s signature and date of birth.

|  |  |
| --- | --- |
| Primary | Secondary |
| Full birth certificate or extract of birth certificate | Bank, credit card or ATM card with your signature |
| Passport | Recent bank statements, bank book, credit union or building society statement showing recent transactions |
|  | Apprenticeship indenture papers |
| Driver’s licence with photograph |  |
| 18 plus card with photograph | Other recognised photographic I.D (e.g. security identification, Cash Converters Card) |
| Queensland shooter’s licence with photograph | Original Australian marriage certificate or divorce papers |
| Immigration papers or other documents issued by the Commonwealth Department of Immigration, Multicultural and Indigenous Affairs | Pensioner Health Benefit Card or Centrelink’s Customer Reference Number (CRN) on their official document or correspondence |
| Naturalisation or citizenship certificate | Occupational registration documents |
|  | Taxation Assessment Notice |
|  | Life insurance policies |
|  | Medicare card |
|  | Student card with photograph |

To the best of my knowledge, the information provided on and in conjunction with this form is true and correct. I understand that I will commit an offence and be liable to a penalty under the *Housing Act 2003* if I knowingly provide to the Murwweh Shire Council false or misleading information that may influence decisions about my eligibility for housing services and may make my application invalid.

**Name of applicant/s Date**

**Signed by the applicant/s Date**

**Full name of witness Position**

**Signature Date**

***The witness must be either a Justice of the Peace/ Commissioner for Declarations, a Solicitor, an officer of the Murweh Shire Council, a current employee of another government department or agency. The witness must also sight two of the identification items for each applicant.***