

KEMPSEY LOCAL ABORIGINAL LAND COUNCIL

HOUSING APPLICATION FORM

Please understand that the information you provide on this form will help the **KLALC** make decisions relating to your application.

The information will be used to make the following;

- Your eligibility for housing
- The type of housing best suited to you
- The size of the property needed
- The location needed

Required Information;

- Proof of Income e.g. Centrelink statement, Payslips, letter from Employer.
- Photo I.D, Birth Certificates

PERMISSION STATEMENT FOR KLALC TO COLLECT AND EXCHANGE INFORMATION WITH OTHER ORGANISATIONS RELEVANT TO YOU HOUSING APPLICATION

- When assessing your application or during any tenancy, we may need to exchange information relevant to your housing with FACS Housing Services or other organisations.
- Without this permission your application cannot be processed.
- You have the right to look at your personal information and to make a correction, in accordance with the *NSW Privacy and Personal Information Protection Act 1998*.
- When signing this application, you are confirming that you understand these statements and give permission to complete these actions.

DECLARATION

1. I understand the instructions given on this application form.
2. I agree that the information provided is correct to the best of my knowledge
3. I understand the above permission statement and declaration.
4. I have supplied all the required Evidence including; Proof of Income and Photo I.D.

NOTE: For your application to be processed, you MUST answer all the questions and SIGN the declaration

Applicants Name (please print)

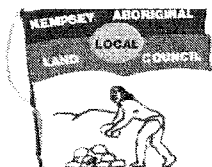
Joint Applicant (please print)

Applicants Signature

Joint Applicant Signature

Date

Date



KEMPSEY LOCAL ABORIGINAL LAND COUNCIL

THIS FORM IS CONFIDENTIAL. THE INFORMATION YOU SUPPLY WILL ONLY BE USED FOR THE PURPOSE OF BEING HOUSED WITH KLALC IN ACCORDANCE WITH THE PRIVACY LEGISLATION REQUIREMENTS.

NEW APPLICATION ☐

REVIEW ☐

1. APPLICANT DETAILS

Applicant 1: Name: _____

Applicant 2: Name: _____

1.1 Address of Main Applicant

No & Street: _____

Suburb: _____

Post Code: _____

1.2 Contact Phone Numbers of Main Applicant

Home		Mobile		Work	
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1.3 Are you a member of Kempsey Local Aboriginal Land Council? Yes / No

1.4 Are you related to any staff or Board member of KLALC? Yes / No

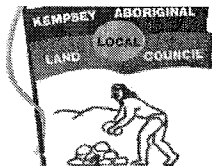
2. CURRENT HOUSING DETAILS

2.1 Who are you currently housed by?

Housing Pathways NSW <input type="checkbox"/> (Housing NSW or AHO)	Aboriginal Housing <input type="checkbox"/>	Community <input type="checkbox"/>	Private / Landlord <input type="checkbox"/>
Mainstream Housing <input type="checkbox"/>	Other _____ (i.e. Boarding, Homeless, Living at home/relatives etc)		

Name of Landlord/Housing Provider:	
No of persons at your address:	
No of bedrooms at your current address:	
Are you the primary tenant who appears on the Residential Tenancy Agreement	Yes/No
What is your weekly rent/board you pay at your current address	\$ _____ NOTE: A current rent receipt must be provided with application
Are you currently buying, paying off a mortgage or own any other property?	Yes/No

3. HOUSING REQUIREMENTS



KEMPSEY LOCAL ABORIGINAL LAND COUNCIL

3.1 What are your housing requirements?

Do you require accommodation for?	Single <input type="checkbox"/> Couples <input type="checkbox"/> Family <input type="checkbox"/>
How many people are to be housed?	Adults _____ Children _____
How many bedrooms do you require?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
Do you have pets?	Yes/No
Please detail any special needs that maybe required	

a. Please list all people to be housed, including yourself

Name	DOB	Relationship to you

Once you have completed this form please return to:

Address Details: Suite 7,1 John Street, Kempsey NSW 2440.

PO Box 540 Kempsey NSW 2440.

klalc1@bigpond.com

OFFICE USE ONLY

Date Received: _____ Name _____ Signed _____

Eligibility Decision: ELIGIBLE/NOT ELIGIBLE

Date: _____

Approved at Board meeting

Date: _____