

WAVERLEY COUNCIL

Housing for Older People

APPLICATION FOR WAITING LIST



Please fill out **both sides** of this form

1. Are you currently on the waiting list for NSW Housing accommodation?

☐ Yes ☐ No

If yes, what is your NSW Housing T-file number?

When did you apply to NSW Housing?

2. Your details – Person 1

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Name

Date of birth

3. Your details – Person 2

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Name

Date of birth

Address

Postcode

Phone

4. Alternative contact person

(eg relative or friend)

Name

Relationship to you

Phone

5. How many people live in your current housing?

6. Are any of the people seeking housing a couple who would normally share a bedroom?

☐ Yes ☐ No

7. How many bedrooms are there in your current housing?

8. Who do you rent this property from?

9. How long have you lived in your current housing?

10. How many years have you lived in the Waverley Local Government Area?

From (year) to (year)

(Please attach evidence)

11. How much rent do you pay each week? (total for household)

\$.....

12. Do you receive an Aged or Disability Pension or Veteran's Affairs benefit?

☐ Yes ☐ No

Pension type

Pension number

13. Do you have a Centrelink Health Benefits Card?

☐ Yes ☐ No

(If yes, sighted by interviewer:)

14. Do you receive the full pension?

☐ Yes
☐ No

Please **turn over** to complete form

OFFICE USE ONLY Date received: Application number:

15. Do you have any income in addition to the pension?

☐ Yes ☐ No

Total weekly income including Pension.
(If more than one person is seeking assistance please state combined income)
\$.....

16. Do you have:

Cash/Savings

☐ Yes (value \$) ☐ No

Car

☐ Yes (value \$) ☐ No

A share in a business

☐ Yes (value \$) ☐ No

A share in a property

☐ Yes (value \$) ☐ No

If you have answered 'Yes' to any of the above, please explain why this cannot be used to help you with your housing

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17. What problems do you face with your current housing and the facilities provided there?

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18. Do you or anyone in your household have any medical conditions or disabilities which make it difficult for you in your current housing? If 'yes', please describe

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19. Have you tried to find other housing which would be more suitable for you?

☐ Yes ☐ No

If 'yes', what difficulties have you had trying to find other housing?

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20. Is English your first language?

☐ Yes ☐ No

If 'no' what language do you prefer to speak?

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(we can organise an interpreter who speaks this language for your interview if you wish)

21. What type of accommodation would best suit your needs?

☐ Bedsitter ☐ One bedroom unit
☐ Two bedroom unit ☐ Any of these

22. Please provide any other information or comments you would like to make to assist us in regard to your housing needs. Include details of special housing needs, eg wheelchair access, floor location etc

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*Please ensure you have filled out all sections of the form as completely as possible and **sign below**.*

I state that the information I have given in this form is true and correct to the best of my knowledge.

Print name

Signature

Date

Your personal information will not be given to anyone else without your consent. We may need to contact other agencies to assist us in processing your application. By signing below you give your consent to Bridge Housing, on behalf of Waverley Council, to collect and disclose information given in your application.

I consent to the collection and disclosure of personal information about me and any person listed on this form by Bridge Housing relevant to my application for housing to Waverley Council, NSW Housing, Centrelink, and/ or Department of Veterans' Affairs.

Print name

Signature

Date