

# APPLICATION FOR COUNCIL RENTAL UNIT

Please address all communications to:

Chief Executive Timaru District Council PO Box 522 Timaru 7940

# **Please Note:**

These are small one bedroom or studio units only. They are **<u>NOT</u>** suitable for families or children.

To qualify for a Council Rental Unit the Applicant/s must:

- ✤ Have a housing need; AND
- ✤ Receive one of the following benefits through Work & Income NZ:
  - Superannuation
  - Veteran's pension
  - Supported living payment (health condition)
  - OR current equivalent permanent benefit; AND
- Be able to live harmoniously in close proximity with other tenants, many of whom are elderly.
- Note that Council does NOT permit the Tenant to keep on the premises, any dogs, rabbits, fowls, pigeons or other livestock except one cat and/or two cage birds. Cats need to be neutered/spayed, and written evidence of this supplied if requested.

Please read entire form including Information/Criteria on last page, before completing and submitting application.

- **Confidentiality:** All information supplied in this Application will be treated in strict confidence, in line with Timaru District Council privacy policy and Privacy Act 2020.
- **Enquiries:** Please telephone Customer Services, (03) 687 7200.

The following Application is for tenancy of a Council Rental Unit. Successful Applicant/s will be required to enter into a Residential Tenancy Agreement with Council.

#### WHERE A COUPLE IS APPLYING THE DETAILS OF BOTH APPLICANTS MUST BE SUPPLIED

1.	Mr / Mrs / Miss / Ms (cross out whichever does not apply)		
	Full Name:		
	Surname:		
	Date of Birth:		
	Driver Licence Number: (5a)		

Mr / Mrs / Miss / Ms (cross out whichever does not apply)

Full Name:	
Surname:	
Date of Birth:	
Driver Licence Number: (5a)	

### 2. ADDRESS

Number of Years at this address:
If less than 5 years, previous address:
Current Telephone:
Current Email:

#### 3. CONTACT DETAILS

#### a) Contact Person

Please supply the details of **a contact person** that we can talk to about your application if we cannot contact you (e.g. relative, friend, Power of Attorney). This person must give signed consent.

Relationship to Applicant/s:
Name:
Contact person's signature:
Address:
Telephone:
E-mail:

# b) Next of kin (if different than above)

Relationship to Applicant/s: ..... Name: ..... Address: ..... Telephone: ....

### 4. REASON FOR APPLYING FOR A COUNCIL RENTAL UNIT

# 5. TYPE OF ACCOMMODATION REQUIRED

SINGLE Person/COUPLE (cross out whichever does not apply)

Note: ALL Council Rental Units are one bedroom or studio units only.

To assist with the allocation of a unit, please state below the general area you require a unit and any particular requirements.

Timaru	Pareora	
Temuka	Pleasant Point	
Geraldine		

Particular Requirements

Units are offered on the basis of need and information supplied in your application. If a unit that is suitable is declined, the applicant will be offered one other unit, depending on availability within a 12 month period from the first offer. If no unit is accepted, the applicant may be removed from the wait list.

Units may be offered as they become available to those with the highest need at the time of availability. Length of time on the wait list does not ensure priority.

Applicants on the wait list for more than 24 months will be requested to reapply, to update current situation, to Council in writing if they wish to remain on the list for vacant units. If no response is received within 1 month, the names will be removed.

# 6. DOCTOR'S LETTER

A recent Doctor's letter pertaining to your health, and confirming that you are able to care for yourself, must be provided to identify any existing medical conditions. *Please ensure that if you have a medical reason for requiring a unit in a particular area this should be included in your Doctor's letter.* 

Please supply your Doctor's name and telephone number

.....

.....

If we do house you, and you find that the unit is not suitable for health reasons, Council does not guarantee that you will be able to transfer to another Council unit (which shall be totally at your cost), as your eligibility will be ranked in accordance with the waiting list at the time.

### 7. PRESENT ACCOMMODATION

(a) Do you rent a house, flat, home unit, rooms, caravan, or are you boarding?

.....

(b) What is your weekly rent/board \$.....

If possible please supply a reference from your current/most recent landlord.

#### **8. FINANCIAL POSITION**

(2)

# (1) **PROPERTY OWNED**

If you **Own Property**, (in your name, company or as Trustee of a Trust), please see the Information/Criteria sheet at the back of the application.

(a) Please give brief details e.g. whether it is a house, home unit, farm, land, section etc

(b)	Address of property		
 (c)	If you do not live at your property, please state why		
(d)	What fortnightly rentals do you receive from the property?	\$	
(e)	What mortgage/s is/are on your property?	\$	
(f)	What is the Rateable Value of your property? \$		
(g)	Do you intend to sell or otherwise dispose of your property? YES	/ NO	
	A letter from your Solicitor regarding the disposal of your assets required. If further details are required in this regard please con Property Unit.	•	
(h)	Please supply name and telephone number of your Solicitor		
ОТН	ER ASSETS		
•	ou have any other assets, apart from household, personal effects , give brief details, approximate values etc.	and vehicle?	
Banl	x Account/s		
(Nar	ne of Bank)	\$	
Ассс	Bank Branch Account Number Suffix   Ount No. Image: Suffix Image: Suffix Image: Suffix		
(Nar	ne of Bank) Bank Branch Account Number Suffix	\$	
Acco	ount No.		
Inve	stment/s (details)	\$	
Shar	es	\$	

# 9. INCOME (after Tax)

Please give details from income received from all sources **WEEKLY** 

(a)	Salary or Wages	\$
(b)	Type of Benefit	\$
	Any additional Benefit, e.g. Accommodation allowance	
		\$
(c)	Benefit Number	
(d)	Other income (please state from whom)	
	From	\$
	From	\$

#### **10. RENTAL PAYMENTS**

If we can accommodate you, your rent will need to be paid by Automatic Payment through your Bank. Please supply your Bank Account number that you wish your rental payments to be taken out of:

(Name of Bank)			 (Town)	
Account No.	Bank	Branch	Account Number	Suffix
51 1 .	·c ·			

Please advise if you wish to pay your rent <u>weekly or fortnightly</u> and what <u>day of</u> <u>the week</u> you wish it to be taken out of your account.

Weekly / fortnightly: .....

Rent to come out (day of the week) .....

#### 11. BOND

A bond is required to be paid for the equivalent sum of three weeks rent. The bond will be lodged with Tenancy Services and is refundable at the termination of the tenancy, provided there are no rent arrears and the premises are left in a satisfactory condition. If you have difficulty with paying this, it is suggested you contact WINZ.

12. CHECK LIST: Your application will not be considered if it is not completed in FULL and you have not supplied us with the following documents and consents:

A Doctor's letter

A reference from your current/most recent landlord

If relevant, a letter from your Solicitor regarding disposal of assets

Consent to Credit Check

# **13. PRIVACY ACT DECLARATION**

I/We consent to the Timaru District Council collecting the details provided in this application, retaining and using these details for the purpose of assessing and administering this application. This consent is given in accordance with the Privacy Act 2020.

Name/s: .....

.....

Applicants Signature/s:....

.....

### **14. CONSENT TO CREDIT CHECK**

I/We consent to the Timaru District Council conducting a credit check against my/our name/s, retaining and using these details for the purpose of assessing and administering this application.

Name/s: .....

.....

Applicants Signature/s:....

.....

NB: If consent is not given, Council is under no obligation to consider this application for accommodation.

#### **15. SIGNED AND WITNESSED**

I/We declare that all details in this application are true and correct to the best of my/our knowledge.

Name/s:		
Applicants Sign	ature/s:	
Please have your signature/s witnessed by a Council Officer or a Justice of the Peace		
Witnessed by:	(Name)	
	(Position)	
Signature:		
Date:		

This form must be COMPLETED IN FULL, including signing of sections 13, 14 & 15.



# COUNCIL RENTAL UNIT INFORMATION / CRITERIA

### The criteria for an applicant to be eligible to apply is as follows:

- Be receiving a Work and Income New Zealand (WINZ) superannuation, veteran's pension, assisted living payment (health condition), or current equivalent permanent benefit.
- Have a housing need (in that the applicant's current accommodation is unsuitable for various reasons, which the applicant may list in the application form).
- An applicant's income is to be equal or less than the WINZ income limit for Nonbeneficiary Accommodation Supplement.
- An applicant's household asset (including property and other assets) limit is equal to two times the Work and Income New Zealand income limit for Non-beneficiary Accommodation Supplement.
- The non-beneficiary income limit information is set annually and can be found on the Work and Income website:

https://www.workandincome.govt.nz/map/deskfile/extra-helpinformation/accommodation-supplement-tables/income-cut-out-points-for-nonbeneficiaries-curren.html

- An Application must include a Doctors letter recommending the applicant for a Council unit, stating that the applicant is capable of caring for themselves and listing any physical or mental disabilities which may make some of our units unsuitable.
- An Application must also include a letter of reference from the applicant's current landlord if applicable.
- If Credit Check results are not suitable, we will not proceed with application.
- If an applicant has a prior criminal conviction held on record at the time of application, this must be divulged with appropriate details. The applicant is not required to divulge such details which have been cleared under the Criminal Records (Clean Slate) Act 2004.

Once the application is received, Council's Property Social Housing Officer will contact the applicant to discuss their application in order to assess their circumstances or inform that they don't meet the criteria. This assessment is based on the interview, application, Doctor's letter, credit check results, and any other relevant circumstances. The assessment, in the form of a score, is then placed next to the applicant's name on the Council unit wait list, then the applicant will be contacted by mail or email and advised of their assessment.

### Council reserves the right to decline any application.