

ARGYLE HOUSING

32-36 Wingecarribee Street, Bowral, P.O. Box 1026, Bowral 2576. 02 4861 2753

Market Street Lodge 25 Market Street, Goulburn NSW 2580 0458 046 359

As a community housing provider, Argyle Housing offers a variety of accommodation options. These include group share accommodation at Ainslie Village and Market Street, and community housing options in the areas surrounding Campbelltown, Bowral, Goulburn, Yass, Queanbeyan, Young, Wagga Wagga, Griffith and Albury.

This application is specific to shared accommodation at Market Street Goulburn.

To help us meet your needs please complete this application form, giving as much information as possible. This will assist staff in selecting suitable applicants for vacancies that arise. Attach any support letters if appropriate or requested.

If you have any questions concerning the application form or need assistance with completing it, please contact the front office for advice. Your application will be treated as completely confidential.

Please note: Six weeks proof of income must be attached. This may be in the form of a statement from Centrelink, Superannuation or work payslips.

Incomplete applications will not be accepted. If you would like a copy of your application please ask at Reception.

Have you been referred?			Are you	Are you a former tenant of Argyle Housing?		
Yes	No	If yes, by whom?	Yes	No		

1. PERSONAL PARTICULARS (PLEASE PRINT CLEARLY)

First Name	Surname			Date of Birth		
Street		Suburb		State	Postc	ode
Phone No	Email					
How long have you live	d in NSW?	(Years)	(Months)			
Are you currently registered with NSW Housing? No						
Yes Do you own a car? Yes No Model Rego No						
Please tick the following relevant categories. Gender: Male Female Transgender						
Employed Full Time	Employed Part T	ime Emp	oloyed Casual	Unemployed	Student	Pensioner
Australian Citizen Permanent Resident Aboriginal/Torres Strait Islander Non-Resident						
Non-English Speaking Background - Please indicate language spoken						
Country of Origin Do you require an interpreter? Yes No						
Single Married	De-Facto	Divorced	Separated	Widowed		~
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2. CHILDREN PARTICULARS

We need this information to determine what kind of accommodation will be suitable for you.

Do you have any children? Yes No How Many?

Do your children live with you permanently? Yes No

If you don't have custody of your children, how often do you have access to them?

Child's/Children's name/s D.O.B. Sex

3. INCOME AND RENT

Please give details of all income received. (Note: Six weeks of Proof of Income must be attached)

Income (p/week gross) Income Source (eg. Centrelink, work, etc)

Applicant's CRN number

Rent is set at an agreed Market Rent price of \$255.00 Per Week.

Rent is payable fortnightly in advance as of the commencement date of the Occupancy Agreement, and may be paid in any of the following ways:

- Periodic payments directly from the tenant's bank account firstly obtain account details from Argyle Housing.
- At any Commonwealth bank by cash or cheque firstly obtain account details from Argyle Housing.
- By bank cheque or money order made payable to:

Argyle Community Housing Ltd PO Box 1026, Bowral 2576

4. OTHER INFORMATION

If we need to contact you by phone and you are unavailable, who else can we leave a message with? (If you wish your application to remain confidential, write 'Me Only'.)

Please give details of an emergency contact:

Name

Phone No

Relationship

Relationship (eg.landlord)

It may be helpful if you could provide references concerning your previous address and/or character.

Name

Phone No

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5. PETS

Do you have any pets? Yes No

Туре

Details:

6. ELIGIBILITY CRITERIA

To be eligible for housing provided by the organisation, you must meet all of the following criteria: (Please tick the check box to show the Eligibility Criteria that you meet)

I am an Australian Citizen or Permanent Resident.

I have an income of not less than \$100.00 per week, and no more than the gross income limit applicable for public housing (check at the front desk for this amount).

I will apply for Commonwealth Rental Assistance, upon commencement of tenancy and agree to forward 100% to Argyle Housing to assist with my rental payment.

I do not have assets (car, home, boat, land, etc) worth over \$40,000.00.

I do not own residential property in Australia.

I am capable of independent (ie. non-supported) living or

I am capable of independent living with some support (statement from support provider must be attached)

I am able to demonstrate a personal need for housing.

I accept the objectives of Argyle Housing (copies of these objectives are available from the front office).

7. MEDICAL AND CONFIDENTIAL INFORMATION

Do you have any medical conditions, physical disabilities, or habits that your Housing Manager should know about or can coordinate support services for?

Drugs	Yes	No	Depression	Yes	No	
Alcohol	Yes	No	Disabilities	Yes	No	
Mental Illness	Yes	No				
If any other illness please give details.						
Do you require support and where from?						
Please give details of your support worker, if applicable						
Name Phor		Phone No	0	Organisation		
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7. MEDICAL AND CONFIDENTIAL INFORMATION (CONT.)

The Applicant provides authority for the Housing Provider 'Argyle Housing' to liaise directly with the support provider or other relevant support organisation and vice versa on all matters that are relevant to sustaining their tenancy.

Applicant Signature			Provider Signature			
	8. CURRENT HOUSING What is your current housing situation?					
	Homeless	Own Home	NSW Housing	Other		
	Private Rental	Friends	Refuge/Crisis Accommo	dation		
	Why do you need to move from your current address?					

9. APPLICANT'S DECLARATION

I declare that to the best of my knowledge the information given on this Application Form is true and correct and that there is no conflict of interest* in applying for accommodation with Argyle Housing. The Organisation has my permission to complete checks to verify any information given. In applying for accommodation with Argyle Housing, I acknowledge that I am aware of, and agree to abide by, the objects, rules and policies of the Organisation (copies are available at the front office).

Applicant Signature

Date

(*If there is a conflict of interest these words must be deleted and a statement concerning the conflict is to be attached.)

If you make a false declaration to the Organisation your tenancy may be reviewed. The Organisation may exercise its right to check the information you have provided.

Please return your application form and proof of income to the front office at Market Street, or mail/fax your application form and proof of income to:

Market Street Lodge 25 Market Street, Goulburn NSW 2580 email: goulburn@argylehousing.com.au

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WAITING LIST

When your application is accepted it will be placed on the Waiting List. The Waiting List is reviewed every January, and you will be asked to confirm your details at that time. If you do not respond to the review, your application will be deleted from the Waiting List at that time. Deleted applications will not be re-instated. You will need to reapply. It is therefore in your best interest to ensure that changes in phone numbers / addresses are notified to the Organisation so that we can contact you regarding the Waiting List and when a vacancy arises.

AUDIT OF FILE

From time to time the Organisation is audited to ensure that it meets National Community Housing Standards. Confidentiality is assured. Do you give consent to your file being audited as part of the Association's accreditation process by an external evaluation team?

Yes No

CHECK LIST

Have you answered every question?

Do you meet the Eligibility Criteria?

Have you attached Proof of Income?

Have you provided an emergency contact number?

Have you completed the Skills Register on the previous page?

Have you included photo identification?

OFFICE USE ONLY

Eligible for Housing? Yes No

Proof of Income supplied? Yes No

Interviewed By: Housing Manager

Confirm database previous Argyle tenancy?

Team Leader approved? Yes No

Staff Signature

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Support Manager

Date