

# Application for Community Housing



## ARGYLE HOUSING

Gundungurra Country  
32-36 Wingecarribee St,  
PO Box 1026, Bowral NSW Australia 2576  
1300 274 953 | [info@argylehousing.com.au](mailto:info@argylehousing.com.au)

## AINSLIE VILLAGE

Ngunnawal Country  
23 Quick Street,  
Campbell ACT Australia 2612  
02 6162 6800 | [ainslievillage@argylehousing.com.au](mailto:ainslievillage@argylehousing.com.au)

As a community housing provider, Argyle Housing offers a variety of accommodation options. These include group share accommodation at Ainslie Village, 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 Ainslie Village.

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?

Yes      No      If yes, by whom?

Are you a former tenant of Argyle Housing?

Yes      No

## 1. PERSONAL PARTICULARS (PLEASE PRINT CLEARLY)

First Name	Surname	Date of Birth			
Street	Suburb	State	Postcode		
Phone No	Email				
How long have you lived in the ACT?	(Years)	(Months)			
Are you currently registered with ACT Housing?	Yes	No			
Do you own a car?	Yes	No	Make	Model	Rego No
Please tick the following relevant categories. Gender: Male      Female      Transgender					
Employed Full Time	Employed Part Time	Employed 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

# Application for Community Housing



## 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 income based as follows:

Maximum 25% of income plus 100% of Commonwealth Rent Assistance (Any additional levies are in addition to rent)

All applicants requesting a rebated rent will be required to apply for Commonwealth Rent Assistance. Market rent will be charged if this condition is not met.

Rent is payable fortnightly in advance as of the commencement date of the Tenancy 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

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

Name

Phone No

Relationship  
(eg.landlord)

# Application for Community Housing



## 5. PETS

Do you have any pets? Yes No Type

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 desk).

## 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 Phone No Organisation

# Application for Community Housing



## 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.

Tenant Signature

Provider Signature

## 8. CURRENT HOUSING

What is your current housing situation?

Homeless

Own Home

ACT Housing

Other

Private Rental

Friends

Refuge/Crisis Accommodation

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 reception).

Tenant 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 Ainslie Village, or mail your application form and proof of income to:

Ainslie Village  
23 Quick Street,  
CAMPBELL ACT 2602  
Phone: (02) 6162 6800

# Application for Community Housing



## 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      Support Manager

Confirm database previous Argyle tenancy?

Team Leader approved? Yes      No

Staff Signature      Date