

Application for Pensioner Housing

Please note to qualify for a pensioner unit, the applicant must:

- Have attained the age of 65 years
- Have a genuine housing need
- Be within the asset barrier
- Provide a current letter from your doctor to say you can live alone independently
- Applications will be treated in the strictest confidence.

Rent is charged at market rate OR 30% of a pensioners gross superannuation (taking into account their accommodation supplement) whichever is the LESSER of the two and is reviewed annually

For further information please contact Toni Ensor on 07 823 3800

Pets: Pensioner housing tenants are not permitted to keep pets.

Accommodation: Waipa District Council has village style pensioner housing units in Cambridge, Leamington, Kihikihi and Te Awamutu. Bedsits are suitable for an individual only but most of our one bedroom units can accommodate a couple.

Pensioner housing may only be occupied by the pensioner(s) named in this application and who sign a Tenancy Agreement with Waipa District Council. No other persons may reside in the relevant property.

Tenancy Conditions:

Successful applicants will be required to enter into a Tenancy Agreement with the Waipa District Council under the following conditions:

- Upon acceptance of your application, a recognised Tenancy Agreement will be completed between the applicant and the tenancy officer acting on behalf of the Waipa District Council.
- Two weeks bond will be payable, which will be lodged with Tenancy Services until the end of your tenancy.
- Rent is to be paid fortnightly by Direct Debit into the nominated bank account for the Waipa District Council.
- Under the Privacy Act 1993 we must have your signed consent for the above conditions including authority to contact family or medical professionals should the need arise.

Applicants signature

Date

Second Applicants signature (if applicable)

Date



Application for Pensioner Housing

The following application is for tenancy of a Waipa District Council Pensioner unit.

Applicant Details:

Surname: _____	First Names: _____
Title: Mr / Mrs / Miss / Other	Date of Birth: _____ Age: _____
NZ Resident: Yes / No	Length of Residence in Cambridge/Te Awamutu: _____
Current Residential Address (incl post code)	Postal Address (if different)
_____	_____
_____	_____
_____	_____
Home Phone: _____	Mobile: _____

Emergency Contact Details:

Name of Doctor	_____
Address of Medical Centre:	_____ Phone No: _____

Next of Kin/Contact Details: (please provide details for two family members contactable in an emergency)

Name of First Contact:	_____
Relationship to Applicant:	_____
Address:	_____
Contact Phone: _____	Mobile: _____ Email: _____
Name of Second Contact:	_____
Relationship to Applicant:	_____
Address:	_____
Contact Phone: _____	Mobile: _____ Email: _____

Any Additional Applicable Information:

Partner Details: (if applicable)

Surname: _____ First Names: _____
 Title: Mr / Mrs / Miss / Other

Referee:

(name of one contact person who is not a family member is to be supplied in order to be contact for a verbal reference)

Name: _____
 Address: _____
 Phone No: _____

Assets:

Do you own your own property? Yes / No If Yes please complete Section A, if No please complete Section B

Section A: (you own your own property)

Is the property: (please circle)	House	Home Unit	Commercial	Land only	Other (please specify)
Address of Property: _____					
What is the Government Valuation of the property? \$ _____					
What is the total mortgage on the property? \$ _____					
Is this property Rented out? Yes / No					
If Yes, what weekly rent do you receive? \$ _____					

Section B: (you DO NOT own your own property)

Name of landlord:
(to be contacted) _____
 Landlord's address: _____
 Landlord's contact phone no: _____ Mobile No: _____
 Amount of current bond: \$ _____ Weekly rent you currently pay: \$ _____

Other Assets: (please list all other assets apart from your house and furniture and pre-paid funeral plans)

		Do you own any of the below? If Yes, please provide details.			
		v	Type	Year	Approx Value
Cash	\$ _____				
Bank Accounts	\$ _____		Car		
Investments	\$ _____		Boat		
Shares	\$ _____		Caravan		
Other	\$ _____		Other		

Have you sold any property during the last 5 years?	Yes / No
If Yes, please provide the following details:	
Property Address: _____	
Date Sold: _____	Sale Price \$ _____
Where Mortgage was held: _____	

Income Details: (please provide details of income received from all sources)			
Salary or wages:	\$	_____	
Benefit:	\$	_____	Type of benefit? _____
Additional benefit/s:	\$	_____	Type of benefit? _____
Any other income:	\$	_____	Please specify: _____

Reason for Application: (please specify your reason for applying for Pensioner Housing in the Waipa District)

Preferred Location: (please circle the area that you would prefer to live)			
Cambridge	Leamington	Te Awamutu	Kihikihi

Declaration of assets

I/We _____
 (Full name) (Full name)

being an applicant(s) for a Council pensioner unit within the Waipa District, hereby certify that my/our assets, including cash, investments, house and property (excluding furniture, car, personal effects and pre-paid funeral plans) do not exceed the sum of \$20,000 (twenty thousand dollars). In the case of a couple \$35,000.00 (thirty five thousand dollars) GST inclusive. I/we consent to completing a biennial financial/medical declaration form as requested by the Councils Tenancy Officer in accordance with the Pensioner Housing Policy 2017.

 Applicants signature

 Date

 Second Applicants signature (if applicable)

 Date

Final declaration

All the particulars supplied above are true and correct and I/we have attempted to answer all questions.

I/we make this declaration conscientiously believing the same to be true.

 Applicants signature

 Date

 Second Applicants signature (if applicable)

 Date
