

Clutha District Council

APPLICATION PACK
FOR PEOPLE WISHING TO APPLY FOR

CLUTHA DISTRICT COUNCIL COMMUNITY HOUSING





Unit Features

- All one bedroom units
- Kitchen including oven
- Bathroom with extractor fan
- Living/lounge area with heatpump

Get in Touch

- Call in at the Rosebank Council Office, any of the Community Libraries or the isite to pick up an application pack.
- Email: delwyn.burrow@cluthadc.govt.nz for any further questions or an email copy of the application pack.

General Information about housing units

- **The tenant shall be responsible for the electricity and phone account.**
- **Some of the locations provide off street parking and limited covered parking. The allocation of parking space is on a first in first served basis in agreement with the Council. For those locations without off street parking, the tenants are requested not to park their vehicles on the grass in order to prevent damage to the ground, especially in winter.**
- **The tenant is not to change any locks at the units. Council holds keys for access to the units in the event of an emergency or during an inspection or when maintenance is required with the tenants permission.**
- **Grounds maintenance is arranged with Council contractors who undertake the maintenance of the grass and some gardens. The tenant is generally responsible to maintain and plant the gardens surrounding the unit.**
- **Council conducts annual inspections to determine what the maintenance requirements are for each unit and allows Council to check and update future maintenance plans, sometimes requiring input from contractors.**
- **The replacement of light bulbs is the responsibility of the tenant.**
- **When the unit is vacated, it will be inspected to check for any damage and general cleanliness. If the unit requires cleaning after vacating, Council will engage a contractor to complete this with the cost being charged back to the tenant.**
- **Tenants and tenants visitors are not permitted to smoke inside Council units or any other buildings on Council Housing sites.**
- **Animals are only allowed if approved with the Community Facilities Team Leader.**

- 98 Units
- Locations and number of units:
  - Balclutha - 64 Naish St (15), Toshvale - 98 Charlotte St (22), 2 Argyle St (4)
  - Milton -37 & 39 Elderlee St (11), 72 Spenser St (5)
  - Owaka (6) - 13 Burns St
  - Clinton (6) - 7 Side St
  - Kaitangata (3) - 51 Eddystone St
  - Waihola (5) - 9 Nore St
  - Lawrence (11) - 19 Harrington St
  - Tapanui (10) - 5 Kent St

- All units are Healthy Homes Compliant with ongoing assessments every three years.

- Who is eligible?
  - Aged 25 and over with priority to 65 years and over first.
  - You must be a NZ citizen OR have a permanent resident visa and have lived in NZ continuously for at least 2 years.
  - Able to meet the income and asset criteria.
  - Able to live independently and care for themselves or require minimum support from an agency.
  - Pass credit check/reference check and interview.

- What is the Income limit?
  - The Income limit is equal to the Work and Income NZ income limit for non-beneficiary Accommodation Supplement. This is set annually by Work and Income and is on their website.

- What is the asset limit?
  - The Asset limit is equal to twice the Work and Income NZ income limit for the non-beneficiary Accommodation Supplement. This is set annually by Work and Income and is on their website.



Community Housing Application Form

Clutha District Council

Before you start: *Please complete all fields in this application form, supplying evidence where required. Once completed, contact Clutha District Council on* ***0800 801 350*** *to make an appointment with the Community Facilities Team Leader, who will go through your application with you.*

If you need help completing any part of this form or have questions, the Community Facilities Team Leader can assist you at your appointment.

Protecting your personal information is important to us. Please refer to our ***Privacy Policy*** *for more information on how and why we collect and store your information, what we will use it for and who we can share it with.*

Visit www.cluthadc.govt.nz/privacy.

Applicant(s) Details

Title	Full first names	Surname	Date of birth

Current address:			
Town/City:		**Postcode:**	
Contact phone:			
Email address:			

Have you lived in a CDC housing unit before?	☐ **Yes**	☐ **No**
Have you explored housing options other than CDC?	☐ **Yes**	☐ **No**
If yes, what options have you considered?		

New Zealand Residency

Are you a New Zealand citizen?	☐ **Yes**	☐ **No**
If no, are you permitted to reside in New Zealand permanently?	☐ **Yes**	☐ **No**

If you're not a New Zealand citizen, but are allowed to reside in New Zealand permanently, please bring your immigration documents with you when you come in for an interview.

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www.cluthadc.govt.nz

Current Circumstances

Current accommodation			
☐ Renting	☐ Living in own home	☐ Boarding	☐ In emergency accommodation

How long have you lived there?	

Please provide the residential addresses for any properties where you have lived for the last five years.

Is there a time limit when you need to move from your current accommodation? *(For example, if you have received a notice from your landlord to vacate)*	☐ Yes	☐ No

If yes, when do you need to leave your current accommodation?

If no, why do you need to move from your current accommodation?

How much notice do you have to give?		
Do you have any pets?	☐ Yes	☐ No

What is your reason for applying for a CDC Community Housing Unit?

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Gross Income – Per Annum (Year)		
Income source	**Annual amount**	**Type**
a) Ministry of Social Development benefit	**$**	
b) Salary/wages	**$**	
c) Other income	**$**	
Total	**$**	
Evidence required: Please supply a certificate of earnings from your employer and/or verification that you are in receipt of a benefit from Work and Income NZ.		

Assets and Liabilities (for all applicants)		
Do any applicants currently own or have a financial interest in any house, flat or other property in New Zealand or overseas?	☐ **Yes**	☐ **No**
If yes, address of property / properties	*Supply evidence*	
Value of applicant's share?	**$**	
Total value of property?	**$**	
Is the property mortgaged?	☐ **Yes**	☐ **No**
If yes, what is the principal outstanding?	**$**	
Have you owned or had a financial interest in any property in the last five years?	☐ **Yes**	☐ **No**
If yes, what is the address of the property / properties?	*Supply evidence*	
When was it sold?		
What was the sale price?	**$**	
Value of your share?	**$**	

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List all bank accounts / investments / KiwiSaver	*Supply evidence*
Account / Investment	**Value**
	$
	$
	$
	$
Other assets (excluding personal effects and furniture)	**$**
Motor vehicle/s	**$**

Housing Needs

What size of unit do you need?	☐ **1 Single Bedroom**	☐ **1 Double Bedroom**

Please indicate the location of the units you wish to apply for:

☐	**Balclutha – Argyle Street**	☐	**Milton – Elderlee Street**
☐	**Balclutha – Naish Court**	☐	**Milton – Spenser Street**
☐	**Balclutha – Toshvale**	☐	**Owaka**
☐	**Clinton**	☐	**Tapanui**
☐	**Kaitangata**	☐	**Waihola**
☐	**Lawrence**		

Is there anything else you think we should know regarding your current situation or your housing needs?

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Criminal Offences

Please indicate whether you have been convicted of any criminal offence or if you have any criminal charges pending (do not include traffic offences other than drink driving, or convictions that are subject to the Criminal Records (Clean Slate) Act 2004.)	☐ **Yes**	☐ **No**
If yes, please provide details:		
I consent to CDC making enquiries to verify the information in my application.	☐ **Yes**	☐ **No**

Emergency and Support Contacts

In the event of an emergency, please complete the following contacts below:

Doctor's information			
Doctor:			
Medical centre:			
Emergency contact name:			
Phone number:			
Support agency assistance			
Do you receive assistance from a support agency? For example, Pact, Mental Health Services, Presbyterian Support, etc.	☐ **Yes**	☐ **No**	
Agency:		**Contact number:**	
Agency:		**Contact number:**	
Next of kin			
Name:			
Address:		**Phone:**	
Town/City:		**Postcode:**	
Email:			
Relationship to applicant:			

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Employer (if applicable)	
Name of employer:	
Contact number:	
Solicitor or Trustee (if applicable)	
Name:	
Contact number:	

Statutory Declaration

(To be witnessed by a Solicitor or the High Court of New Zealand or a Justice of the Peace)

Declarant details	
I/We (full names): Applicant	
Of (full address):	
Occupation:	

I/We solemnly and sincerely declare that all statements made and all particulars contained in the foregoing application are, to the best of my/our knowledge, information and belief, true, full and correct in each and every particular, and I/we make the solemn declaration conscientiously believing the same to be true, and under and by virtue of the Oaths and Declarations Act 1957.

Signature and witness details		
Signature(s) of applicant:	**Declared before Justice of the Peace or Solicitor of the High Court.**	
	Date:	
	Declared at:	
	Before me:	

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Privacy Declaration

(To be witnessed by a Solicitor or the High Court of New Zealand or a Justice of the Peace)

I/We (full names): *(Applicant/s)*	

The applicant(s) by signing below specifically agree and acknowledge with Clutha District Council as follows:

a) *That Clutha District Council hereby informs me that it may disclose to a credit reporting agency certain personal information about me, including:*
   - *information contained in this application*
   - *my identification*
   - *the amount of the credit applied for*
   - *payments which may become more than 60 days overdue*
   - *advice that payments are no longer overdue*
   - *a serious infringement which Clutha District Council believes I have committed.*

b) *The Clutha District Council is assessing this application and any later request for a credit limit increase, may obtain from a credit reporting agency a credit report containing personal credit information about me and, a credit reporting agency a credit report containing personal credit information about me and. A credit report containing personal credit information about my commercial activities or commercial credit worthiness.*

c) *Clutha District Council may give to and obtain from any third party, information about my personal or commercial credit arrangements including information about my credit worthiness, credit standing, credit history or credit capacity for the particular purpose for which the information is required.*

Signature and witness details

Signature(s) of applicant:	**Declared before Justice of the Peace or Solicitor of the High Court.**	
	Date:	
	Declared at:	
	Before me:	

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Community Housing Units Reference Form 1

Clutha District Council

Applicant/s name/s

How long I have known the applicant for:	years	months
Recent contact with the applicant is: *(Tick which one applies)*		
More than once a month in the last year	☐	
About once a month	☐	
About 4 times last year	☐	
About twice last year	☐	
Less than the above	☐	

1. In what context have you known the applicant, e.g. neighbour, at church, bowls, etc?

2. Do you consider the applicant to be honest and trustworthy?				
☐ Yes	☐ Mostly	☐ Not always	☐ No	☐ Don't know

3. Were you involved in their employment?	☐ Yes	☐ No
If yes, do you have any comments?		
4. Are you aware of any criminal record?	☐ Yes	☐ No
If yes, do you know what it was for?		

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5. Is the applicant able to live independently?				
☐ Yes	☐ Mostly	☐ Not really	☐ No	☐ Not sure
If 'Not really', 'No' or 'Not sure', what are the reasons?				

6. Do you think this applicant will be compatible and get along with other elderly tenants who will live in close proximity?				
☐ Yes	☐ Mostly	☐ Not really	☐ No	☐ Not sure
If 'Not really', 'No' or 'Not sure', what are the reasons?				

7. Would you recommend the Applicant as a tenant to the Clutha District Council?		
☐ Yes	☐ No	☐ Not sure
If 'No' or 'Not sure', what are the reasons?		

8. Do you have any other comments you would like to make?

Name:	
Signed by referee:	
Date:	

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Community Housing Units Reference Form 2

Clutha District Council

Applicant/s name/s

How long I have known the applicant for:	years	months
Recent contact with the applicant is: *(Tick which one applies)*		
More than once a month in the last year	☐	
About once a month	☐	
About 4 times last year	☐	
About twice last year	☐	
Less than the above	☐	

1. In what context have you known the applicant, e.g. neighbour, at church, bowls, etc?

2. Do you consider the applicant to be honest and trustworthy?				
☐ Yes	☐ Mostly	☐ Not always	☐ No	☐ Don't know

3. Were you involved in their employment?	☐ Yes	☐ No
If yes, do you have any comments?		

4. Are you aware of any criminal record?	☐ Yes	☐ No
If yes, do you know what it was for?		

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5. Is the applicant able to live independently?				
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☐ Yes	☐ Mostly	☐ Not really	☐ No	☐ Not sure
If 'Not really', 'No' or 'Not sure', what are the reasons?				

7. Would you recommend the Applicant as a tenant to the Clutha District Council?		
☐ Yes	☐ No	☐ Not sure
If 'No' or 'Not sure', what are the reasons?		

8. Do you have any other comments you would like to make?

Name:	
Signed by referee:	
Date:	

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Community Housing Application Checklist

Clutha District Council

Please check you have included these in your application:	
Filled out your application form	☐
Included two references	☐
Page 6 and 7 has been witnessed and signed by JP or Solicitor	☐
Immigration documents (if applicable)	☐
Evidence of income	☐
Evidence of assets, including bank statements	☐
Evidence of liabilities	☐

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