

**Application for a Council Housing Unit**  
**'CONFIDENTIAL'**

**Clutha**  
 District Council



**1. Applicant's details:**

Applicant's full name:

Date of Birth:

Applicant's address:

Marital Status:

**Spouse/Partner information:**

Name:

Date of Birth:

Contact Telephone:

**2. Accommodation required** - Please indicate the location of the units you wish to apply for:

Balclutha – Argyle Street ...	<input type="checkbox"/>	Lawrence	<input type="checkbox"/>
Balclutha – Naish Court	<input type="checkbox"/>	Milton – Elderlee Street	<input type="checkbox"/>
Balclutha – Toshvale	<input type="checkbox"/>	Milton – Spencer Street	<input type="checkbox"/>
Clinton	<input type="checkbox"/>	Tapanui	<input type="checkbox"/>
Kaitangata	<input type="checkbox"/>	Waihola	<input type="checkbox"/>
Owaka	<input type="checkbox"/>		

You may wish to apply for more than 1 location

**3. Existing accommodation** - Are you:

Renting	<input type="checkbox"/>	Boarding	<input type="checkbox"/>
Living in own home	<input type="checkbox"/>	In emergency accommodation	<input type="checkbox"/>
Or other	<input type="checkbox"/>	... please state:	<input type="text"/>

If you have lived at this address for less than five years, please give details of previous addresses in order and approximate time at each for last five years:

1<sup>st</sup> previous:

2<sup>nd</sup> previous:

3<sup>rd</sup> previous:

If you are in accommodation other than your own home, please state:

Landlord's Name:

Landlord's Address:

**4. Medical**

If elderly, a doctor's note is required with your application, indicating your ability to look after yourself and remain safe. Please attach where necessary.

## 5. Other details

Are you:

Retired

Beneficiary

Employed

..... Name of employer:

... No. of years with employer:

.....Employer's address:

...If less than 5 years, name of previous employer:

..... No. of years with previous employer:

.....Previous employer's address:

### Next of Kin

Name:

Address:

Contact number:

### Solicitor or Trustee

Name:

Address:

Contact number:

## 6. Statutory Declaration

I / We (full names):

Of (full address):

Occupation:

do 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(s):

Declared at

This

Year

Day of

Before me

A solicitor of the High Court of New Zealand

A Justice of the Peace

## 7. Privacy Declaration

I / We (full names):

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

1. 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 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.
2. 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 report containing information about my commercial activities or commercial credit worthiness.
3. 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(s):

Declared at

This

Year

Day of

Before me

**A solicitor of the High Court of New Zealand**

**A Justice of the Peace**