



Eligibility and application process

This form is an application for a Whangarei District Council (WDC) Pensioner Housing unit.

As landlord WDC has appointed a Tenancy Manager to act as agent for all tenancy management services. Applications and all queries should be directed to:

Whangarei Agricultural & Pastoral Society

127 Bank Street, Whangarei

PO Box 3, Whangarei 0140

Phone: 09 438 3109 extn 1 | Email: pensionerhousing@wap.org.nz



Process

- 1. Please complete all questions on the form.
- 2. Attach documents listed on page 11
- 3. Submit your completed application, Ministry of Justice and doctors consent forms and supporting documents to the Tenancy Manager above
- 4. The information you provide is for applying for a tenancy for pensioner housing and may be used for a credit, reference check and Ministry of Justice report on criminal convictions. Your privacy is protected under the Privacy Act 2020. Under the Privacy Act 2020, you have the right to ask for a copy of all information held about you, and have the right to request the correction of any incorrect information.
- 5. Your application will be assessed by the Tenancy Manager. If you are eligible you will be invited to an interview where your housing needs will be assessed. You are welcome to bring a support person or interpreter.
- 6. If your application is approved your name will be added to the Pensioner Housing Register until a vacancy occurs
- 7. When a unit becomes vacant all applicants on the Register will be reviewed and assessed.

 Offers for accommodation are not based solely on length of time on the housing register but are on a needs basis.

Office use only	Date received:
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Checked for completeness: Received by:

Letter sent: Accepted Declined

Eligibility criteria

To be eligible for a Whangarei District Council Pensioner Housing unit, tenants must:

- be a New Zealand citizen or be permitted to reside in New Zealand,
- · be aged 65 or over,
- · be retired from fulltime work,
- be a recipient of New Zealand Superannuation, a New Zealand War Disablement Pension or New Zealand Veterans Pension and
- own no more than \$40 000 (single) or \$60 000 (couple) worth of assets. This includes both cash and non-cash assets as defined by New Zealand Work and Income for the accommodation supplement (excludes car, furniture and personal affects).

Where a couple are in a relationship and apply, both applicants must meet the criteria above.

Applicant details APPLICANT 1 Gender First or given name(s): Family or surname: Known as:	Verification required:Pass	port or Driver's License or	Birth Certificat	te.
Previous names:				
Current address:				
Previous addresses:				
Phone:		Date of birth:		
Place of birth:		Ethnicity:		
Email:				
Are you eligible for New Z	ealand National Superann	uation:	Yes	No
Marital status:	Single	De facto	Married	
	Separated	Divorced	Widowed	
What are your connection	ns to Whangarei? (e.g. leng	th of time lived locally or f	amily support	etc.)

Do you have any prev	ious, current or pending crimina	al convictions?	Yes	No
If you answered yes, ¡	olease provide details – date an	nd conviction:		
As part of your applic	cation assessment Council (or it	s agent) will request a rec	cord of your	
Criminal Conviction F	History. By signing this application of the state of the	on you will be authorising	the Ministry	
	ds (Clean Slate) Act 2004.	our criminal convictions, s	abject to sect	tion /
APPLICANT 2 Ger	nder:			
First or given name(s)) :			
Family or surname:				
Known as:				
Previous names:				
Current address:				
Previous addresses:				
Phone:		Date of birth:		
Place of birth:		Ethnicity:		
Email:				
Relationship to applic	cant 1:			
Are you eligible for New Zealand National Superannuation: Yes			No	
Do you have any prev	Do you have any previous, current or pending criminal convictions? Yes N		No	
If you answered yes, p	olease provide details - date an	d conviction:		

Current accommodation details

Definitions for housing are:

Own home – you own and live in your own home

Rental housing – you have a tenancy agreement for your home. This can mean market rental or subsidised housing

Temporary accommodation - non-private dwellings such as hostel, boarding house, shelter or motor camp accommodation

Shared accommodation - sharing someone else's dwelling such as family and friends - on a temporary basis

Without shelter or uninhabitable housing - no shelter or makeshift shelter such as shack or

car or living on the street or i	n a dilapidated dwelli	ng		
What is your current living sit	uation?			
Own home		Temporar	y accommodation	
Rental housing		Shared ac	commodation	
Without shelter or uninl	nabitable housing			
What are your reasons for ap Please provide details and as demonstrate your housing ne	much information as	_		ı to
Are you currently paying rent	or board?		Yes	No
If yes, how much is your week	kly rental?		\$	
Name of landlord:				
Landlord address:				
Reasons for leaving:				
Do you have to give notice?	Yes	No How	many weeks	

Including yourself and partner (if applicable) how many people live in your home?

What is your relationship with the people you live with?

Family Flatmates Friends

Other N/A

Number of bedrooms where you are currently living?

Do you have your own room?

Yes

No

Have you tried to find alternative accommodation elsewhere? Yes No

If you answered yes, how long have you been looking and why do you think you have been unable to find alternative accommodation?

Financial

Please tick relevant income sources and record amounts received weekly.

All applicants need to provide a breakdown of weekly income received from WINZ Ph 0800 552 002.

For full or part time employment, you will need to provide 3 months' payslips for each applicant.

INCOME DETAILS

Income	Weekly a	amount \$
	Applicant 1	Applicant 2
National Superannuation		
Number		
Veterans pension		
Overseas pension		
Supported living payments		
Unemployment benefit		
Working (full-time / part-time)		
Other (e.g. money received for investment interest, rent or board)		

ASSETS

Cash assets

Examples of cash assets:

- · money in the bank or with a savings organisation
- money lent to other people or organisations
- · money in Bonus Bonds, shares, debentures or Government stock
- · Kiwisaver.

Do you own your own home?

Yes

No

Do you have any cash assets? Yes No

If you answered yes to any of these 2 questions, please provide details below:

Asset type	Valı	ue \$	
	Applicant 1	Applicant	2
House			
Money in the bank			
Money on loan to other people or organisations			
Bonus Bonds			
Shares			
Kiwisaver			
Other			
Non-cash assets			
Examples of non-cash assets:			
· car			
· boat			
caravan or motorhome			
· trailer			
· land or buildings (other than your home).			
Do you have any non-cash assets?		Yes	No

If you answered yes, please provide details below:

Asset type	Val	ue \$
	Applicant 1	Applicant 2
Car		
Boat		
Caravan or mortorhome		
Land and buildings		
Other		

Credit history

Council will require a check of your credit history. This will help us confirm your details as well as report on any previous credit enquiries, payment defaults, court judgments and bankruptcies if applicable.

A poor credit history does not necessarily result in declining your application but may mean that we require a direct payment for rent is set up from your NZ Superannuation.

By signing this application form you will be allowing this information to be released to us for the purposes of assessing your application.

Emergency contact / tenant representative

Contact 1: Please provide details of someone we can contact if there is an emergency during your tenancy. This could be a family member or a friend who you have chosen to be your Tenant Representative.

Please advise if they are able to act on your behalf in relation to your tenancy or healthcare.

You may wish to appoint a Power of Attorney (POA) who can act on your behalf if you are unable to do so through accident or illness. You can get more advice from the Citizens Advice Bureau or your solicitor regarding your rights and the options available.

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CONTACT FOR	RANY	SSUE D	URING TENA	NCY	
Contact 1					
Name:					
Address:					

Relationship:			
Landline:	Mobile:		
Email:			
Is this person legally appointed as your POA?		Yes	No
If you answer yes, please provide a copy of the PC	DA document.		
If not your legally appointed POA, do you underst Manager, may call your Contact / Tenant Represe an emergency or under extreme circumstances.	•	-	re in
Yes, I agree and understand (please sign)			
Contact 2 (If first contact is unavailable)			
Name:			
Address:			
Relationship:			
Landline:	Mobile:		
Email:			
Is this person legally appointed as your POA?		Yes	No
If you answer yes, please provide a copy of the PC	DA document.		
If not your legally appointed POA, do you underst Manager, may call your Contact / Tenant Represe an emergency or under extreme circumstances.	_	_	re in
Yes, I agree and understand (please sign)			

Referee details

Please supply us with the name and phone number of your current landlord (if applicable) and one other person who would provide a personal reference. Referees must be unrelated to you and must be someone who has known you for at least 12 months.

Referee 1	
Name:	
Relationship:	
Landline:	Mobile:
Email:	
Referee 2	
Name:	
Relationship:	
Relationship: Landline:	Mobile:
	Mobile:

Housing

What areas are you interested in?

Hikurangi Kamo Mairtown

Maunu Onerahi Otaika

Tikipunga Will consider all

This housing is offered on a needs basis. The placements we offer are intended to be mutually beneficial for both parties, but applicants cannot select a preferred unit and Council reserves the right to cancel an application if, after honest efforts have been made, the applicant continually declines accommodation offered.

What type of unit are you interested in?

Bedsit Single bedroom Two bedroom

PETS			
Please note: WDC have a no pet policy. In specia one bird may be considered. Conditions will app	•	est for one co	at or
Do you have a pet?		Yes	No
If yes, please advise type of pet:			
CAR			
Please note: parking is limited and no car park is ask for more information if you have a car.	s specifically designated for ea	ch unit. Pleas	se
Do you have a car?		Yes	No
If yes, please give details:			
Make/Model:	Year:		
Colour:	Registration #:		
Is the car registered and warranted?		Yes	No
MOBILITY SCOOTER			
Please note: Mobility Scooters are not allowed to available with covered shelters and outdoor pow			9
Do you have a mobility scooter?		Yes	No
YOUR REQUIREMENTS AND INTERESTS			
Tell us about yourself so that we can help find the have any hobbies or interests. Do you have any pramps?			

Checklist

Please provide the following supporting documentation for each applicant:

Identification and age - i.e. copy of birth certificate, driver's license, passport

Weekly income

- NZ Superannuation / income from WINZ, each applicant must include a Breakdown of Benefit letter from WINZ
- Working full / part time 3 months' payslips

Assets – Proof of the balance of all bank accounts over the past three months. You do not have to provide your full bank statements, only the balance of the accounts over this period. Your bank or budget advisor may be able to help you with this.

Current housing costs – tenancy agreement or letter from the landlord confirming your rent / board

Doctors consent form for each applicant – to be filled in by your regular doctor to verify your suitability for communal and independent living

Power of Attorney document (if applicable)

Declaration

I authorise Whangarei District Council (or their agent) to:

- obtain (and any agency to disclose) information required to assess my application including a credit reference check and a Ministry of Justice report of Criminal Convictions and personal references.
- 2. seek disclosure from any credit agency details of credit history and any indebtedness
- 3. obtain my forwarding address upon vacating a Whangarei District Council property

I declare that the information contained in this application is true and correct.

I acknowledge Whangarei District Council's (or their agents) right to check the validity of the information supplied by me about my application and ongoing tenancy, including medical, social and financial details where applicable.

I understand that if the information provided is misleading or false, the application may be cancelled or my tenancy terminated.

Applicant 1	Applicant 2
Name:	Name:
Date:	Date:
Signature:	Signature:



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Working together with



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