



This form is NOT an application for housing assistance

1 of 3

Declaration

I/We declare that the information I/We have provided on this form is correct. I/We understand that providing false information may affect eligibility for Housing Authority assistance.

Tenant signature



Date

D

D

M

M

Y

Y

Y

Y

Household member signature



Date

D

D

M

M

Y

Y

Y

Y

Any information provided will be used solely for housing related purposes and will only be released in accordance with the Housing Authority Privacy, Confidentiality and Duty of Care Policy.

Office use only

Documents Included

☐ Rent Assessment form

Received and checked by:

Person Ref

Tenancy Ref

File

Admin Unit

Objective Ref

Date received stamp

Office use only (HSO/HPSO to complete)

Requesting household member:

Is eligible for public housing assistance

Yes ☐ No ☐

Is eligible for property type and size

Yes ☐ No ☐

Has a current application for housing assistance

Yes ☐ No ☐

Is an existing declared householder*

Yes ☐ No ☐

Has a current outstanding debt**

Yes ☐ No ☐

Relationship to tenant

☐ Partner

☐ Child (over 16)

☐ Other

Please specify

* Date first declared as a household member

D	D	M	M	Y	Y	Y	Y
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** Total of current debts

\$

Provide details of any other relevant factors/circumstances.

HSO/HPSO Recommendation

☐ Approve request

☐ Decline request

Note the reasons for recommendation in line with Housing Authority Policy.

Name

Position

Signature



Date

D	D	M	M	Y	Y	Y	Y
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Manager Housing Services/Area Manager decision

☐ Approve request

☐ Decline request

Note the reasons for recommendation in line with Housing Authority Policy.

Name

Position

Signature



Date

D	D	M	M	Y	Y	Y	Y
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