

**GRAFTON NGERRIE
Local Aboriginal Land Council**

**Residential Tenancy Application Form
(7)**

NOTE: If you think you may need assistance completing this document, please inform the Housing Officer and he/she will assist you.

Section 1: Applicant Details

SECTION: _____

CHRISTIAN NAME: _____

DATE OF BIRTH _____

SPOUSE SURNAME: _____

CHRISTIAN NAME: _____

CURRENT ADDRESS: _____

SUBURB: _____ POST CODE: _____

How long have you been at this address? _____

If less than one year please provide details of your last 2 addresses:

What name currently appears on the tenancy agreement for your last rental property?

What is the total weekly rent paid at your current address? _____

Do you currently own any houses/units/villas or land? YES/NO

Are you currently purchasing any other housing etc? YES/NO

Do you have confirmation of Aboriginality? YES/NO

If you have answered YES to this question you will be required to provide confirmation and attach a copy of this application.

If you have answered NO to this question, you will be required to provide the confirmation unless you are the non-Aboriginal spouse of the applicant.

Section 2: Children

Please list below the details of the children that will be housed:

Name	DOB	SEX	Relationship to applicant.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you have anymore children please attach a note to the application form.

Number of people to be housed: _____

How many members of the family to be housed are Aboriginal: _____

Section 3: Income

If the LALC offers you housing you will be required to provide proof of income for all household members.

If you are employed, please complete this section:

Employer's name: _____

Years employed: _____

Your Gross Wage: _____

Spouse Gross Wage: _____

If you are currently receiving assistance from Centrelink, please complete the following:

What Pension or Benefit do you receive? _____

What is your Pension or Benefit income? _____

Do you receive rent assistance? YES/NO

If YES How much rent assistance do you receive? _____

Section 4: Other information required in regards to the application

Are you currently living in a house owned by the Department of Housing?
YES/NO

Are you currently on the Department of Housing's Waiting List? YES/NO

Note: LALC recommends that you also apply to be housed through the Department of Housing through the local department office.

Have ever been evicted from a property that you have rented? YES/NO

If YES, please describe the circumstances to the best of your ability:

Have you ever left rented premises without finalizing your lease agreement YES/NO

If YES, please describe the circumstances to the best of your ability:

If you have answered to YES to the above 2 questions, was it from private rental or the Department of Housing or other Social Housing Provider? Please indicate below:

Why do you require to be housed by the LALC?

Please indicate if any persons to be housed will require special housing design needs such as ramps for wheel chair access, special taps etc:

Does anybody in your family that will be housed with you have a disability that requires you or them to spend more than \$55.00 per week on medication?
YES/NO

What area do you prefer to live in? Please indicate: _____

Please attach either a copy of at least two written references or provide the names and contact numbers of 2 personal referees:

It is important that you contact the LALC of any changes in your circumstances, particularly if you change your address and other contact details.

I give permission for any information that I have provided to the LALC contained in my application for housing to be verified with previous landlords, the Department of Housing or any other Social Housing Provider.

I understand that all personal information contained within this application shall remain the property of the LALC, and shall only be used in relation to my application for housing and not for any other purpose, and that all information pertaining to my application is kept strictly confidential, and that I may access my personal files in regards to my application at any reasonable time in accordance with the Freedom of Information Act 1981.

NAME (PRINT): _____

SIGNATURE: _____

DATE: _____

CURRENT ADDRESS: _____

SUBURB: _____

POST CODE: _____

CONTACT NUMBER: HOME _____

WORK: _____

**GRAFTON NGERRIE
LOCAL ABORIGINAL LAND COUNCIL
CONFIRMATION OF ABORIGINALITY**

(8)

Name of Applicant _____

Address of Applicant _____

Applicant File/Reference Number: _____

It is hereby confirmed that the above named applicant, seeking assistance for housing from the LALC has provided sufficient evidence to indicate Aboriginal descent; and

- Identifies as an Aboriginal
- Is recognised and accepted by the LALC Community

Where the applicant's family has lived for _____ years.

- Is recognised and accepted by the * _____ community where he/she currently lives and has lived there fore _____ years.
(*Insert name of Community).

Resolution Number: _____ Date of Meeting: ____/____/____

Affix Common Seal in this space.

Name: _____

Signature: _____

Posiition: _____

Name: _____

Signature: _____

Position: _____

**APPLICANT DECLARATION
(9)**

I, _____
(full name)

Are you also known by any other name, i.e. maiden name, community or traditional name? _____

Of: _____
(address)

Occupation: _____

Contact Numbers: _____

DO SOLEMNLY AND SINCERELY DECLARE THAT:

1. I am of Aboriginal descent.
2. I identify as an Aboriginal.
3. I am accepted as an Aboriginal by the LALC Community where my family lives.
4. I am accepted by the * _____ Community in which I currently live.

(* Insert name of Community)

I make this solemn declaration by virtue of the Statutory Declarations Act 1959 as subject to the penalties provided by that Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

Signature of the Applicant: _____

Declared at _____ this _____ day of _____ 200__

Before me _____
(Signature of person before the declaration is made)

(title of person before whom the declaration is made, e.g. Justice of the Peace, Commissioner for Declarations or other witnesses in the Statutory Regulations 1993 No. 156).