

Application Form

Section 1: Household Information

Please list all members of your intended household with NCCHC

Name	Relationship to you	Date of Birth	Annual income
1.	SELF (HEAD APPLICANT)		\$
2.			\$
3.			\$
4.			\$
Total household annual income:			\$

NOTE: Please complete a separate **APPLICANT INFORMATION** form for each resident listed above who is 18 years of age or older, including completion of each household members' Applicant Income Questionnaire.

Attach all completed forms when submitting this application.

The HEAD APPLICANT will be our first resident we will contact if further information about this application is required.

Proof of identity (photo-ID) will be required for all listed adult residents

Section 2: Housing preferences

Please select all locations where you require housing:

- | | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> Ballina/Alstonville | <input type="checkbox"/> Byron Bay | <input type="checkbox"/> Grafton/Clarence Valley |
| <input type="checkbox"/> Murwillumbah | <input type="checkbox"/> Tweed Heads | <input type="checkbox"/> Lismore/Goonellabah |

Section 3: Housing history

Has any member of your intended household ever been a tenant of Housing NSW, North Coast Community Housing, Aboriginal Housing Office or another community housing provider in NSW?

Yes No (Please circle)

If Yes, please enter the details

Name of household member	Landlord	Property address	Date tenancy ended

Section 4: Your current housing situation

Please provide some information about your current housing situation. In particular, are there any difficulties being experienced by yourself or by other members of your household? (ATTACH ADDITIONAL INFORMATION IF REQUIRED)

Section 5: Declaration

I declare that the above statements are true and correct

I have attached an APPLICANT INFORMATION form for all adult members of my household

I have included statements that verify all forms of income being received by all household members

I have read and understood the NCCHC factsheet on THE AFFORDABLE HOUSING PROGRAM

Signature of head applicant: Date: