

HAUMARU HOUSING

Eligibility and Application

Process

1. Please complete all questions on the application form.
2. Attach documents listed on page 7 of the application form
3. Submit your completed application, doctors consent form and supporting documentations to us at:

HAUMARU HOUSING Limited
Partnership
PO Box 8475
Symonds Street
Auckland 1150

HAUMARU HOUSING Limited Partnership
Level 2
1 Nugent Street
Grafton
Auckland 1023

4. Your application will be assessed by HAUMARU HOUSING. 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.

***Note:** It is your responsibility to advise Haumaru Housing of any changes to your application. If the requested documentation is not supplied within one month, or we are unable to contact you, your application will be cancelled.*

Eligibility Criteria

To be eligible for a home, applicants must meet all of the criteria below:

Age: Be fully eligible for New Zealand National Superannuation at the time of application.

Income: Earn no more than the New Zealand National Superannuation amount from their main source of income.

Assets: Own no more than \$40,000 worth of assets (\$60,000 for a couple). This includes both cash and non-cash assets as defined by New Zealand Work and Income for the Accommodation Supplement.

Live Independently: Able to live independently within an intensive housing environment. This means that you are able to look after yourself or engage and/or manage any support services that you might require, and contribute constructively to harmonious community life within a residential village.

Housing need: This must be current and not a possible future need.

Connection to the area: A familiarity necessary to enable engagement and avoid social isolation and helplessness, and where applicable it is desirable for you to maintain existing links to social agencies and services.

Applicant Details <i>Verification required: Passport or Drivers Licence or Birth Certificate</i>	Applicant 1 <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mr
	First or given name(s):
	Family or surname:
	Please specify any other names used or known by:
	Date of Birth:
	Ethnicity:
	WINZ client number:
	Are you eligible for New Zealand National Superannuation? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> De facto <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
	Do you have any previous, current or pending criminal convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If you answered yes, please provide details - date and conviction:
Applicant 2 <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mr	
First or given name(s):	
Family or surname:	
Please specify any other names used or known by:	
Date of Birth:	
Ethnicity:	
WINZ client number:	
Relationship to applicant 1:	
Are you eligible for New Zealand National Superannuation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any previous, current or pending criminal convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you answered yes, please provide details - date and conviction:	

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Current accommodation and contact details	Where are you living now?		
	Current Address:		
	Post Code:		
	How long have you been residing at this address?		
	Do you currently, or have you previously lived in a property owned or managed by HAUMARU HOUSING, Housing New Zealand, Auckland Council or a community housing trust? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	If Yes, please provide details:		
	Applicants Contact Information:		
	Telephone Number:	Mobile Number:	
	E-mail address:		
	If English is not your first language, please provide details of an agent who can translate on your behalf:		
Translator's name:			
Telephone number:			
First language:			
Relationship to translator:			
Income <i>Please tick relevant income sources, and record amounts received weekly.</i> <i>All applicants need to provide a breakdown of weekly income received from WINZ Ph 0800 552 002</i> <i>For full or part time employment you will need to provide 3 months' payslips for each applicant</i>	Additional income details?		
	Please advise of any income you receive in addition to (or in lieu of) NZ Superannuation		
	Income	Weekly amount \$	
		Applicant 1	Applicant 2
	<input type="checkbox"/> Veterans Pension		
	<input type="checkbox"/> Overseas Pension		
	<input type="checkbox"/> Supported Living Payments		
	<input type="checkbox"/> Unemployment Benefit		
<input type="checkbox"/> Working (full-time / part-time)			
<input type="checkbox"/> Other (e.g. money received for investment interest, rent or board)			

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<p><i>Examples of non-cash assets:</i></p> <ul style="list-style-type: none"> • Leisure boats • Caravans • Land or buildings other than your home <p><i>Note: You might be asked to provide evidence of this at a later stage.</i></p>	<p>Do you have any non-cash assets?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answered yes, please provide details below:</p> <table border="1"> <thead> <tr> <th>Type of Asset</th> <th>\$</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Type of Asset	\$										
	Type of Asset	\$											
<p>Current Living Situation</p> <p><i>Homes that are not structurally sound are verified by Auckland Council as not fit for living. Please note evidence is required</i></p>	<p>Is your home structurally sound?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answered no, please provide details below:</p> <table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>												
	<p>Including yourself and partner (if applicable) how many people live in your home?</p>												
	<p>What is your relationship with the people you live with?</p> <p><input type="checkbox"/> Family <input type="checkbox"/> Flatmates <input type="checkbox"/> Friends <input type="checkbox"/> Other <input type="checkbox"/> N/A</p> <p>Please provide details below:</p>												
	<p>Number of bedrooms where you are currently living?</p>												
	<p>Number of bathrooms where you are currently living?</p>												
	<p>Do you have your own room? <input type="checkbox"/> Yes <input type="checkbox"/> No - please describe</p>												
	<p>Have you tried to find alternative accommodation and if so, why do you think you have been unable to find alternative accommodation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you answered yes, please provide details below:</p> <table border="1"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>												

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Emergency Contact <i>Contact 1: Please provide details of someone we can contact if there is an emergency during your tenancy with Haumarū, i.e next of kin</i> <i>Contact 2: If first contact unavailable</i>	Contact for any issues during tenancy with Haumarū Housing	
	Contact 1:	
	Name:	Relationship:
	Address:	
	Landline:	Mobile:
	Email Address:	
	Contact 2:	
	Name:	Relationship:
	Address:	
Landline:		Mobile:
Email Address:		
Housing Need <i>You may be asked to provide evidence of what you say.</i>	What are your reasons for applying?	
	<i>Please provide as much information as possible about why you are applying for housing with HAUMARU HOUSING:</i>	
	PETS <i>Please note: Haumarū have a no dog policy.</i>	Do you have any pets? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes please advise type of pet?		

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Areas of interest	<p>What areas are you interested in?</p> <p><input type="checkbox"/> North <input type="checkbox"/> West <input type="checkbox"/> South <input type="checkbox"/> East <i>(Tick all that apply)</i></p> <p>Note: There are NO units in central Auckland</p> <p><i>This service 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.</i></p>
Statistical information	<p>How did you hear about Haumaru?</p> <p><input type="checkbox"/> WINZ <input type="checkbox"/> Friends/Family <input type="checkbox"/> Haumaru Tenant <input type="checkbox"/> Internet</p> <p><input type="checkbox"/> Brochure/Magazine <input type="checkbox"/> Age Concern <input type="checkbox"/> Other _____</p>
Checklist	<p>Please provide the following supporting documentation:</p> <p><input type="checkbox"/> Identification and Age - <i>birth certificate, driver's licence, passport</i></p> <p><input type="checkbox"/> Weekly Income -</p> <ul style="list-style-type: none"> • <i>N Z Superannuation/Income from WINZ, each applicant must include a breakdown of benefit letter from WINZ</i> • <i>Working full/part time - 3 months' payslips</i> <p><input type="checkbox"/> Current housing costs - <i>tenancy agreement or letter from the landlord confirming your rent/board</i></p> <p><input type="checkbox"/> Doctors consent form for each applicant - <i>to be filled in by regular doctor to verify communal and independent living</i></p> <p>Please Note: Verification of Assets - <i>We may ask for full bank statements for ALL accounts for the last 3 months for applicants not on the SHR to determine income and asset eligibility.</i></p>
Declaration	<p>I authorise HAUMARU HOUSING to:</p> <ol style="list-style-type: none"> 1. Obtain (and any agency to disclose) a credit reference check 2. Disclose to any credit agency details of any indebtedness to HAUMARU HOUSING 3. Obtain my forwarding address upon vacating a HAUMARU HOUSING property <p>I declare that the information contained in this application is true and correct.</p> <p>I acknowledge HAUMARU HOUSING's 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.</p> <p>Applicant 1</p> <p>Name _____ Date: / /</p> <p>Signature _____</p> <p>Applicant 2</p> <p>Name _____ Date: / /</p> <p>Signature _____</p>

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