

LUTHERAN HOMES TRUST BOARD

APPLICATION FOR A RENTAL UNIT IN LUTHERAN VILLAGE

Please return your completed application form to:

The Administrator
Lutheran Homes Trust Board
P O Box 47

PALMERSTON NORTH 4440

Email: contact@lutheranvillage.org.nz

Please note that the Lutheran Village
is SMOKE FREE

Ph: 0212693012 or 0274596634

PLEASE NOTE: The Lutheran Homes Trust Board reserves the right to decline any application. The Trustees encourage applications to provide full and accurate information. Should assistance be required, applicants are encouraged to contact the Secretary as noted above.

Personal Details:

Surname:	First Names:
Present Address:	Phone Number:
Post Code:	Cellphone Number:
Date of Birth:	Marital Status:

Partner's/husband/wife Details if a Couple are Applying:

Surname:	First Names:
Date of Birth:	

Next of Kin Details:

Next of Kin: Address :	Phone Number (Day) Phone Number (Night)
Details of Powers of Attorney YES/NO	Relationship to You? Phone Number

Health Declaration:

Do you have any disabilities/health conditions? If so please give details:	
Name of Family Doctor: (a letter from your Doctor may be requested)	
Are you able to housekeep and cook for yourself?	YES / NO

Current Living Circumstances:	
Length of time at present address:	
Kind of premises currently occupied (i.e.: House, Unit, Number of Bedrooms etc):	
If rented, please state weekly rent	\$
Are you sharing your current home? Please give details?	

Income:	
What sources of income are you receiving?	
Do you have a current Community Services Card?	YES / NO If not, more details will be required.
If YES , Card Number:	
Are your combined assets less than \$100,000 for a single applicant and \$125,000 for a couple? YES/NO	Please indicate your value of assets: <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> More than \$100,001
Assets include cash in hand, money in the bank or savings organisations, money lent to other people or organisations, mortgage investments, money in Bonus Bonds, Shares, Debentures or Government Stock, but excludes your furniture, car and personal effects.	
Do you own (or part own) any property?	
Have you sold or gifted any assets in the past five years?	
Other Information:	
Have you lodged an application for housing accommodation with any other agency? If YES state date of application: (e.g. Housing Corporation, Palmerston North City Council, Welfare Organisations)	YES / NO

Referee's

Enclose **two** referee's names, **not family members**, or if these are not available, give the names of **two** people who will be able to testify for you. Please include addresses, phone numbers and their relationship to you.

Name:	Name:
Address:	Address:
Phone Number:	Phone Number:
Relationship to you:	Relationship to you:

To assist the Trust Board in the proper consideration of your application, please state the reasons for your application and why your current living arrangements are **NO** longer suitable for you. (attach a separate sheet if required).

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins or other markings on the paper.

STATUTORY DECLARATION

I/we make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957

Signature of Applicant/s:			
Declared at		this	day of
Before me			20

Solicitor of the High Court of New Zealand, Justice of the Peace or Office
Authorised to take Statutory Declarations