

# Senior Housing Application Form



**Bodmin Flats**  
**182—184 Chapel Street**



**Laurent Place**



**Panama Village**  
**120 Ngaumutawa Road**



**Truro Flats**  
**190 Chapel Street**



MASTERTON DISTRICT COUNCIL

**MASTERTON DISTRICT COUNCIL**  
**Caring for the Community**

**PERSONAL INFORMATION**

All information received is confidential.

NAME: .....DATE OF BIRTH: .....AGE: .....

ADDRESS: .....

TELEPHONE NO:.....

NEXT OF KIN: .....

ADDRESS: .....

TELEPHONE NO: ..... RELATIONSHIP:  
.....

**ACCOMODATION INFORMATION**

Do you have a location preference?: .....

Bedsitter Unit ..... One Bedroom Unit .....Double Unit with one Bedroom .....

Please indicate below present accommodation:-

Renting of Tenancy .....	Boarding	Other	Length
If other, give details			
.....			

Is your rent paid up to date?..... Do you owe any rental arrears.....

Name of Landlord.....Telephone No .....

Address .....

Do you have any pets? (Specify).....

**SOURCE OF INCOME**

Are you in receipt of one or more of the following? (Delete those which do not apply)

Supported Living Payment, Widows Benefit, War Pension, National Superannuation, Job Seeker, Other Pension (state)

.....

Number:: .....

**ASSETS**

State your assets (excluding furniture and personal effects) for both husband and wife where applicable.

Do you or your spouse own any property? (Specify).....

Do you or your spouse have any interest in property? (Specify).....

Where is the property situated? .....

By whom is it occupied: .....

Have you or your spouse sold any property during the last five years? .....

**ASSETS**

Do you have any cash in the bank – Give details.....

Do you have any investments? (Specify).....

Do you have any debts? (Specify).....

Other assets (specify) .....

**REFERENCES: *Please provide full references from 2 people who can recommend you (Not relatives)***

**DOCTORS CERTIFICATE – *stating your ability to live independently with or without limited support.***

This application may be cancelled should you change your address and fail to notify the Property Division of the Council.

Failure to disclose information requested in this application may also lead to its cancellation.

**I/We** declare that the information contained in this application is true and correct and acknowledge the right of the Masterton District Council to check the validity of the information supplied including medical information from my doctor or key worker if applicable. If misleading or false, this application will be cancelled.

Applicants Signature: .....

Witness Signature: .....

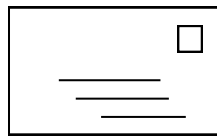
Date: .....

Date Application Received .....

Flat Allocated .....

# To make Application

You can bring this completed form in  
to the Council office,  
161 Queen Street, Masterton  
between the hours of 8.00 am—4.30 pm  
weekdays, or:



Post to: Paula Beasley  
Masterton District Council  
P O Box 444  
Masterton 5840

Email: [paulab@mstn.govt.nz](mailto:paulab@mstn.govt.nz)

Any further enquiries please phone  
Paula Beasley—(06) 370 - 6300

# Privacy Act Authority

MASTERTON DISTRICT COUNCIL  
161 Queen Street, PO Box 444, MASTERTON  
Telephone 06 370 6300 Fax 06 378 8400



MASTERTON DISTRICT COUNCIL

Name: .....

Address: .....

.....

.....

I/We authorise Masterton District Council

- (a) To obtain (and any agency to disclose) a Credit Reference Check, and
- (b) To disclose credit agency details of any indebtedness to Masterton District Council
- (c) For Work and Income New Zealand to provide Masterton District Council upon request, your forwarding address upon vacation of a Masterton District Council property.

Signature of Applicant ..... Date ...../...../.....

Print Name .....

Signature of Joint Applicant ..... Date ...../...../.....

Print Name .....

# Masterton District Council

## Senior Housing Rentals - per week

UNTIL 30<sup>th</sup> JUNE 2019

NAME OF COMPLEX	TYPE OF UNIT	WEEKLY RENTAL
Panama Village Ngaumutawa Road	Bed sitter	96.00
	One Bedroom	102.00
	One Bedroom - Double	108.00
Laurent Place	Bedsitter	92.00
	One Bedroom	99.00
	One Bedroom - Double	109.00
Bodmin – Chapel Street	Bedsitter	92.00
Truro - Chapel Street North side	One Bedroom	99.00
	Limited number of garages	8.00
	Small Shed	n/c

Please note:

To take up tenancy with the Masterton District Council the equivalent of 4 weeks rental is required at the commencement of the tenancy.

Rent        2 weeks rent – first week and one week in advance

Bond        2 weeks rent