

## RENTAL INFORMATION

	AMITY PLACE, REDCLIFFE	MARINA COURT, NEW FARM	
Number of units	24	38	
Address	5 – 11 Downs Street, Redcliffe	227 Moray Street, New Farm	
Furnished	No	No	
Bedrooms	2	1	
Laundry	Yes	Yes 4 washing machines and 4 dryers shared	
Bathrooms	Yes	Yes	
Living Room	Yes	Yes	
Kitchen	Yes	Yes	
Parking	Yes	Yes (limited)	
Both facilities near public transport and within walking distance (1-2km) to supermarket, cafes, medical centres, chemist and parks			

#### APPLICATION PROCESS

- 1. Available units are advertised in the quarterly AWWQ Bulletin;
- 2. Once a unit is vacant AWWQ will accept applications from members via the Rental Application Form (available by calling Head Office or downloading from www.warwidowsqld.org.au);
- 3. All sections of the Rental Application Form must be completed and all required supporting documentation (outlined on the application form) must be provided.
- 4. Applications are reviewed on a needs basis by AWWQ and the successful applicant will be contacted.
- 5. A non-refundable deposit of \$500 and 2 weeks rent is to be paid in advance
- 6. A rental contract must be signed

# AUSTRALIAN WAR WIDOWS QUEENSLAND

## RENTAL APPLICATION FORM

### **SECTION 1: PERSONAL DETAILS**

1. Family Name		<sup>2.</sup> First Name		
3. Current Address				
4. Phone Number		5. Email		
6. DOB		7. Are you an AWWQ Member?	☐ Yes ☐ No	
8. Gold Card #				
9. Emergency Contact Name		Relationship to you		
11. Contact Phone		<sup>12.</sup> Email		
Which best describes your current living situation?		☐ Public housing ☐ Owner-occupier ☐ Private rental ☐ Owner (not occupying)		
<sup>14.</sup> Why are you leaving your current residence?				
Do you smoke?		☐ Yes ☐ No		
Do you have an Enduring Power of attorney?				
☐ Yes - if yes please provide contact details below:				
Contact Name		Relationship to you		
Contact Phone		Email		
□ No - if no please contact head office for further information				

## SECTION 2: FINANCIAL DETAILS

Do you receive DVA Income Support Supplement (ISS)?	☐ Yes (Skip to section 3, question 18) ☐ No - if no please contact head office for further information			
If you do NOT receive DVA's ISS, please provide details about your personal financial position				
Cash (on hand, in bank etc.)	\$	Superannuation	\$	
Value of property you own	\$	War Widows Pension	\$	

Employment Income (if applicable	\$ Value of any shares or investments		\$	
SECTION 3: RENTAL PLANS				
Which rental unit are you applying for?	☐ Amity Place, Red	cliffe	☐ Marina Court	t, New Farm
How long will you be renting from AWWQ?			When would you like to move in?	t l
Do you own a car?	☐ Yes ☐ No	Registration Number	move iii.	
Do you require on-site parking?	☐ Yes ☐ No (Cars not listed here are not approved for permanent on-site parking)			
Have you ever been evicted by a lessor or agent?	☐ Yes ☐ No			
Please provide details below of the 2 (two) references to support your application				
Name:	Contact details:			
Name:	Contact details:			
section 4: medical cleaf	RANCE: to be filled o	ut by your Medi	ical Practitioner (G	GP)
Your patient is applying to live in the medical clearance to ensure the safe			e for independer	nt living, we require a
Name of Medical Practitioner		Clinic	name	
Phone number of clinic		Email	of clinic	
Does the patient have any medical conditions that could prevent safe independent living?	□ No □ Yes		,	
Medical Practitioner Signature			Date	

## SECTION 5: AGREEMENT

By signing below, I consent and agree to the following:  AWWQ units are for independent living  AWWQ units are single-occupant only  If I become unable to live safely / independently, I will be unable to remain at an AWWQ rental unit  If my application is accepted, I agree to pay a \$500 non-refundable deposit  Rental is payable 2 weeks in advance and increases are subject to annual review by the AWWQ Board  The details in my application are true to the best of my knowledge  I have read and understand AWWQ's Privacy Statement  AWWQ is committed to protecting your privacy. Information provided on this form will be maintained for the purposes of assessing suitability for subsidised housing, and for providing service and support to you. Further information may be collected over the phone, such as when you phone us for assistance. Your personal information is stored in our secure database and is never shared externally to AWWQ staff and Board Directors except as directed as a legal requirement. You may access your file by contacting our staff in writing by email or mail. E: reception@warwidowsqld.org.au or P.O. Box 13604, George Street Post Shop, Brisbane, QLD, 4003.If you have any questions regarding your privacy, please contact AWWQ Office on 07 3846 7706.  AWWQ conducts regular inspections of all units with a minimum of seven (7) days of notice to tenants. Subject to prior written notice of at least 7 days the Board, through its agents may at all reasonable times, in the daytime, enter the unit to inspect the condition of the unit, undertake repairs or maintain the unit.  AWWQ may contact your emergency contact person listed on this application if you require medical assistance or we are unable to contact you for an extended period. Please advise AWWQ if you will be away on a planned trip for an extended period of time.				
Applicant Signature		Application Date		
Send completed form, along with the documents listed below, to <a href="reception@warwidowsqld.org.au">reception@warwidowsqld.org.au</a> or by post to PO Box 13604 George Street Post Shop Brisbane QLD 4003  I have included the following with my application:  Copy of ID (eg: Passport, Drivers License, Birth Certificate)  Copy of DVA Gold Card  DVA Income Support Letter (for applicants receiving DVA Income Support Supplement)  Two (2) references				