

REGISTRATION OF INTEREST AND ASSESSMENT FOR RETIREMENT HOUSING

RECORD NO :

FILE NO : 16.51.2.1

Council operates three Retirement Villages in the Copper Coast under the Retirement Villages Regulations Act 2016 offering independent living for retired people wishing to move into a smaller home but remain near family and friends by purchasing a licence to occupy a unit.

The Registration of Interest and Assessment for Retirement Housing form is intended to formalize waiting lists and assist in finding suitable occupants when vacancies arise.

It would be appreciated if you could complete the form as accurately as possible.

All information provided will be treated with strict confidentiality.

APPLICANT 1			
NAME			
DATE OF BIRTH		GENDER	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
CURRENT RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			
APPLICANT 2 (if applicable)			
NAME			
DATE OF BIRTH		GENDER	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
CURRENT RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			
SUPPORT CONTACT/NEXT OF KIN			
NAME			
RELATIONSHIP TO YOU			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			
ENDURING POWER OF ATTORNEY	Yes/No. If no, please provide details who has this authority.		

The Retirement Villages are classified as independent living and not supported accommodation facility. The very popular, fully self-contained units vary in size from 1 to 3 bedrooms, and are maintained by Council, utilising maintenance fees paid by residents.

CURRENT POSITION	
Do you receive a pension?	<input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please state TYPE: _____
Centrelink Reference Number/s:	
How long have you lived in the Copper Coast area?	
Do you have support in the Copper Coast area?	
CURRENT LIVING ARRANGEMENTS:	
Do you live:	<input type="checkbox"/> In own home alone <input type="checkbox"/> In own home with other/s <input type="checkbox"/> Rented accommodation <input type="checkbox"/> Living with family <input type="checkbox"/> Other: _____
Do you own any other property?	
Do you have any pets that you wish to bring with you?	<input type="checkbox"/> What type of animal: _____
What makes it undesirable or difficult to continue living in your current arrangement?	
Do you have a preference as to the Retirement Village you would prefer/not prefer to be considered for?	<input type="checkbox"/> Y-Hafen Retirement Units, Wallaroo (15x 2 & 3 bedroom units) <input type="checkbox"/> Lowender Court Retirement Units, Moonta (12x 2 & 3 bedroom units) <input type="checkbox"/> Norman McCauley Homes, Moonta (10 single bedroom units). <i>Comments:</i>

HOME AND PERSONAL REQUIREMENTS

<p>Do you have any conditions/ disabilities that would affect independent living?</p> <p><i>Eg Vision, Hearing, Mobility, Speech, Intellectual, Mental etc</i></p> <p>If so, please provide further information</p>	
<p>Do you require any home modifications to support independent living?</p> <p><i>Eg lever taps, hand rails, hand held shower, wheel chair access?</i></p> <p>If so, please provide further information</p>	

OTHER

<p>Is there anything else you would like to provide in support of your application?</p>	
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An individual will not be considered suitable by Council, to purchase a license to occupy, if they intend to retain a residential property which they receive rental income from. Council would consider allowing a grace period to sell the principal residence and any other property.

DECLARATION

I declare that the information I have provided is true and correct.			
FULL NAME:			
SIGNATURE		DATE	

<p>FORWARD THIS FORM TO :</p>	<p>DIRECTOR OF CORPORATE AND COMMUNITY SERVICES</p> <p>COPPER COAST COUNCIL</p> <p>PO BOX 396</p> <p>KADINA SA 5554</p>
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