

RETIREMENT HOUSING

RECORD NO :

FILE NO : 16.51.2.1

REGISTRATION OF INTEREST AND ASSESSMENT

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
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
RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			

SUPPORT CONTACT/NEXT OF KIN			
NAME			
RELATIONSHIP		ENDURING POWER OF ATTORNEY	<input type="checkbox"/> YES <input type="checkbox"/> NO If no, please provide details who has this authority. _____
RESIDENTIAL ADDRESS			
POSTAL ADDRESS			
MOBILE PHONE		ALTERNATE NUMBER	
EMAIL			

CURRENT POSITION	
<p>The Retirement Villages are classified as independent living and <u>not</u> 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.</p> <p>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.</p>	
DO YOU RECEIVE A CURRENT PENSION?	<input type="checkbox"/> YES <input type="checkbox"/> NO If 'yes', please state type/s: _____ _____
CENTERLINK 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 ACCOMODATION <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"/> YES <input type="checkbox"/> NO If 'yes', please state type/s: _____ _____
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) <input type="checkbox"/> LOWENDER COURT RETIREMENT UNITS, MOONTA (12s 2 & 3 bedroom) <input type="checkbox"/> NORMAN MCCAULEY HOMES, MOONTA (10x 1 bedroom) Comments: _____ _____

HOME AND PERSONAL REQUIREMENTS	
DO YOU HAVE ANY CONDITIONS/ DISABILITIES THAT WOULD AFFECT INDEPENDENT LIVING? (E.g. vision, hearing, mobility, speech, intellectual, mental etc.) If 'yes', please provide further information	<input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU REQUIRE ANY HOME MODIFICATIONS TO SUPPORT INDEPENDENT LIVING? (E.g. lever taps, hand rails, hand held shower, wheel chair access etc.) If 'yes', please provide further information	<input type="checkbox"/> YES <input type="checkbox"/> NO
IS THERE ANYTHING ELSE YOU WOULD LIKE TO PROVIDE IN SUPPORT OF YOUR APPLICATION?	<input type="checkbox"/> YES <input type="checkbox"/> NO

DECLARATION			
I declare that the information I have provided is true and correct. I agree to comply with any reasonable directions issued by an Officer of Council.			
FULL NAME			
SIGNATURE		DATE	