

Employer's Address: __

Employer's Phone Contact ___

HEAD OFFICE HOUSING AUTHORITY BUILDING LOT 2 SAQA, PLACE VALELEVU P.O.BOX 5275,RAIWAQA TEL: (679) 3387787 LAUTOKA HOUSING AUTHORITY BUILDING 14 TAVEWA AVENUE, LAUTOKA P.O.BOX 5640 TEL: (679) 6668717 LABASA FNPF BUILDING ROSAWA ST, LABASA P.O.BOX 1507 TEL: (679)8816717

APPLICATION FORM (OTHER ESTATES)

		GENERAL	Reference No:							
	a)	-	on this application form. Any changes in your circumstances such as change in address the Public Rental Board if you wish to stay in the waitlist.							
	b)	Those who ca	e parent, Single permanent worker and can go on direct deduction . nnot do Direct Deduction to have a Guarantor. combined weekly gross household income between \$80-\$317 or \$16,500 per annum							
	c)	Who cannot apply?								
			oyed and Applicants with salary over \$317 or 16,500 yearly							
	d)	, ,								
	e)	Number of Occupants pe								
			t – 2 Adults and 2 Children.							
		ii. 2-bedroom fla	ts – 2 Adults and 4 Children's.							
2. P	EDCONA	L INFORMATION: compuls	On .							
2. P	ENSUNA	it information, compus	ory							
	Surr	name :								
	First	t Name :								
ı	Date of I	Birth :	Fathers Name:							
	Sex	(M) (F) Marital St	atus (Married/Single/Divorce) Ethnicity:							
		DRESS:								
	Hon	ne/Postal Address:								
	Pho	ne Contact:	Mobile Contact							
	FNP	F No: TIN#:	E-mail Address:							
	Pres	sent Employer:								
	Emp	oloyer's Address:								
	Emp	oloyer's Phone/Contact:								
	Occ	cupation:								
3. C	O – APP	LICANT								
	Nan	nes:	DOB: Relationship to Applicant:							
	Pho	ne Contact:	E-mail Address:							
	Pres	sent Employer:	Occupation							

Length of Service: _____ Weekly Gross Income : _____ FNPF No: _____ TIN#

4. OTHER FAMILY MEMBERS INFORMATION LIVING IN THE FLAT

Last Name	First Name	Date of Sex Relation		Relationship	Working Yes/No. (Where)	Disable Person (s)	Weekly Gross Income	Phone Contact

*In order to determine the most suitable flat for allocation, please indicate nature of disability for person(s) indicated in the ta above. 5. APPLICANT'S HISTORY a) Present Landlords Name Address Phone Contact b) Why do you want to leave your present address? c) Give reasons for applying to Public Rental Board? 6. APPLICANT QUESTIONNAIRE a. Has applicant ever been sued for arrears? YES/NO b. Has applicant ever been declared bankrupt? YES/NO											
a) Present Landlords Name Address Phone Contact b) Why do you want to leave your present address? c) Give reasons for applying to Public Rental Board? 6. APPLICANT QUESTIONNAIRE a. Has applicant ever been sued for arrears? YES/NO	*In order to determine the most suitable flat for allocation, please indicate nature of disability for person(s) indicated in the table above										
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a. Has applicant ever been sued for arrears? YES/NO		c) Give reasons for applying to Public Rental Board?									
c. Has applicant ever been guilty of felony? YES/NO d. Has applicant ever been locked out of their apartment by the owner/sheriff? YES/NO e. Has applicant ever moved owing rent or damaged property? YES/NO f. Will the applicant be able to pay advance rent and Deposit when flat is Available? YES/NO. 7. AUTHORIZATION a. Applicant authorizes the Board to contact the present Landlord, employer, creditors, neighbors and any other source deemed necessary to investigate applicant's history. b. All information given is true, accurate and complete to the best of Applicant's knowledge. Public Rental Board reserves the right to disqualify the application if information is not as represented. Applicant's Signature: Date: Witness (PRB Officer): Date:											

7. OTHER REQUIREMENTS

- Latest FNPF Statement
- Latest 6 months Bank Statement
- Latest Pay slip (3 months)
- Marriage Certificate
- Birth Certificate for all occupants
- Vaccination Cards for all occupants 18 and above
- Title Search for all above 18yrs
- Statutory Declaration of income for all above 18yrs or unemployed
- Salary Deduction from Employer
- Signed Guarantor form if unable to do direct deductions
- FNPF ID Card
- TIN letter/Joint Card
- Letter from Employer confirming your post.
- Passport Photo for all occupants
- Fees Breakdown:

	1 or 2 Bed Room
Deposit	\$270.00
Advance Rent (1 Month)	\$200.00
Admin & Application fees	\$ 20.00
Total Payable	\$490.00

Fees As of 1st January 2020

1.	Application fee to paid on Allocation of flat	\$20.00
2.	Notice Service Fees (Working Hours)	\$5.00
3.	Notice Service Fees (After Working Hours)	\$10.00
4.	Tenancy Agreement Renewal Fees	\$10.00

- Tenancy Agreement Renewal Fees
 EFL Deposit \$80.00 minimum to \$120.00 maximum
- 6. Maintenance Charges will be determined by whatever is been damaged by the tenants e.g. louvre blade, bulb holder, etc.
- 7. Deposit and Advance rent will also be determined by the type of flat that is been allocated.

8. Household Inventory

DOUBLE BED	STEREO	TELEVISION	SKY DISH	Tin Cards	Bank Name	
SINGLE BED	SIDEBOARD	WARDROBE	FRIDGE	Pay slips	Account No.	
GAS STOVE	E/STOVE	D/TABLE	SETTEE	Declaration	Social Welfare	
DOUBLE BUNK	S/MACHINE	W/MACHINE	Vehicle	Bills	Car Registration	

9. Weekly Expenditure Assessment.

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Food	\$	TOTAL INCOME	
Water Bill	\$	TENANTS	
EFL Bill	\$		
Telephone Bill	\$	OTHERS	
Education	\$	OTHER SOURCES	
Medical	\$	TOTAL INCOME	
Hire Purchase	\$	LESS EXPENSES	
Loan Repayment	\$	UNUSED INCOME	
Others – Fare etc.	\$		

10.	FOR OFFICIAL USE		
		Processed by	Date
		Endorsed by	Date
		Approved by	Date
		Remarks:	