

PROPERTY

# Housing for the Elderly Application Form

The Housing for the Elderly Policy **MUST** be read prior to completing this form.

I have read the Housing for the Elderly Policy and understand the eligibility criteria: Yes No

Applicant's name: \_\_\_\_\_ Date: \_\_\_\_\_

## Housing preference

Accommodation required:

Bedsit unit      Studio unit      Single unit      Queen unit

**Bedsit and Studio units** - open plan bedroom and lounge (with curtain divider and/or glass sliding door divider), separate kitchen and bathroom

**Single unit** - separate bedroom (single bed size), kitchen, lounge and some units have an internal laundry

**Queen unit** - separate bedroom (queen bed size), kitchen, lounge and some units have an internal laundry (for couples only)

*\*Please refer to page 2 for further information on Housing for Elderly Complexes and unit types*

Preferred complex - Please indicate 1st and 2nd preferences

Durham Courts – Rangiora

Tyler Courts – Rangiora

Matthews Courts – Rangiora

Gladstone Road – Woodend

Martyn Place – Kaiapoi

Ranui Mews – Kaiapoi

Meyer Place – Oxford

First preference: \_\_\_\_\_

Second preference: \_\_\_\_\_



## Housing for the elderly information

The Council has housing units available in Kaiapoi, Oxford, Rangiora and Woodend for the elderly with limited means who do not own a property or whose assets are insufficient to purchase a suitable small property in our District.

### Location of housing units

<b>Kaiapoi</b>	<b>Ranui Mews - 26 Hills Street</b> 21 single units, 4 queen units, carports, no garages
	<b>Martyn Place - 23 Meadow Street</b> 1 single unit, 1 studio unit, no garages/carports 19 single units - renovated
<b>Oxford</b>	<b>Meyer Place - 5 Meyer Place</b> 3 queen units, 4 single units, 10 units have carports 6 single units - renovated
<b>Rangiora</b>	<b>Durham Court - 34 Durham Street</b> 2 single units, 2 queen units, no garages/carports
	<b>Matthews Court - 78 Durham Street</b> 14 single units, 4 queen units, no garages/carports
	<b>Tyler Court - 56 Durham Street</b> 4 studio units, 18 bed-sit units, 4 queen units, with a shared laundry, no garages/carports 2 single units - renovated
<b>Woodend</b>	<b>Woodend Units - 29 Gladstone Road</b> 3 queen units with attached single garage

Weekly rentals (from 1 July 2023*)	Weekly fee
Queen units (have separate double bedroom)	\$256.00
Queen units (occupied by one person)	\$234.10
Single units (with separate bedroom)	\$212.20
Studio units	\$190.50
Bedsit units	\$179.50

\* Subject to change. No GST on Housing for the Elderly rental.

Ranui Mews rentals (from 1 July 2023*)	Weekly fee
Queen units (have separate double bedroom) Hills/Williams Street units	\$265.50
Queen units occupied by one person - Hills/Williams Street units	\$245.80
Single units (with separate bedroom) Hills/Williams Street units	\$226.10

\* Subject to change.

Single unit - renovated (from 1 July 2023*)	Weekly fee
Single units (with separate bedroom) - large renovated	\$220.00
Single units (with separate bedroom) - medium renovated	\$256.00

\* Subject to change.



## Personal details

Every person that is applying for housing needs to fill out the details below:

### Applicant One

Mrs Miss Ms Mr

Full legal name: \_\_\_\_\_

Preferred name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Post code: \_\_\_\_\_ Email: \_\_\_\_\_

Home phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Do you have a current driver's licence? Yes No

If yes, driver's licence number: \_\_\_\_\_

Residency status (e.g. NZ Citizen or other (please specify)): \_\_\_\_\_

### Criminal convictions

Have you been convicted of any criminal charges from the previous 10 years, or do you have any criminal charges pending? Yes No

(Criminal convictions that are covered by the Criminal Records (Clean Slate) Act 2004 are not required to be disclosed.)

If yes, please supply details:

**PLEASE NOTE:** All applicants, at the Council's discretion, shall be subject to a criminal records check and a credit rating check.

### Current circumstances

What is your current type of accommodation?

Renting Boarding In your own home Other: \_\_\_\_\_

How much rent do you pay? \_\_\_\_\_ Weekly Fortnightly

How many people are living in your current accommodation? \_\_\_\_\_

How many bedrooms are there in the house you live in at present? \_\_\_\_\_

How long have you lived in your present address? \_\_\_\_\_

Is the property maintenance free? \_\_\_\_\_

If you are renting, did you pay a bond and do you think this will be returned to you when you leave?

Do you receive an accommodation supplement for Work and Income NZ? \_\_\_\_\_



### **Work and Income benefit number and Case Manager - optional**

This information may be collected for those applicants and partners who receive income from Work and Income. The applicant(s) are not obliged to supply this information. The applicant(s) may wish to provide this information:

If, he / she would like to pay his / her rent by Assignment of Benefit; or

#### **Applicant 1**

Benefit number: \_\_\_\_\_

Work and Income Case Manager: \_\_\_\_\_

#### **Applicant 2**

Benefit number: \_\_\_\_\_

Work and Income Case Manager: \_\_\_\_\_

Please explain why you require housing for the elderly accommodation?

Have you been a Waimakariri District Council tenant before?    Yes    No

Do you smoke?    Yes    No

Do you own a pet?    Yes    No    If yes,    Cat    Bird    Fish    Other: \_\_\_\_\_

#### **Health details**

Are you sufficiently active to care for yourself?    Yes    No

If no, who would care for you? \_\_\_\_\_

Do you have help with cleaning, shopping, bathing etc.?    Yes    No

If yes, what sort of help? \_\_\_\_\_

How often do you receive this help? \_\_\_\_\_

### **Applicant's ability to live independently**

Please complete and sign the consent at the top of the attached Independent Living Form(s) (pages 9–12). You will need to take the Independent Living Form(s) to your Doctor to complete prior to lodging your application for Housing for the Elderly.

The information requested will assist the Council to determine whether you are capable of independent living, such that there would not be any significant risk of harm to yourself or others living in a Housing for the Elderly Complex.



## Applicant Two (Queen units only)

Mrs      Miss      Ms      Mr

Full legal name: \_\_\_\_\_

Preferred name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Post code: \_\_\_\_\_ Email: \_\_\_\_\_

Home phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Do you have a current driver's licence?    Yes    No

If yes, driver's licence number: \_\_\_\_\_

Residency status (e.g. NZ Citizen or other (please specify)): \_\_\_\_\_

### Criminal convictions

Have you been convicted of any criminal charges from the previous 10 years, or do you have any criminal charges pending?    Yes    No

(Criminal convictions that are covered by the Criminal Records (Clean Slate) Act 2004 are not required to be disclosed.)

If yes, please supply details:

**PLEASE NOTE:** All applicants, at the Council's discretion, shall be subject to a criminal records check and a credit rating check.

### Health details

Are you sufficiently active to care for yourself?    Yes    No

If no, who would care for you? \_\_\_\_\_

Do you have help with cleaning, shopping, bathing etc.?    Yes    No

If yes, what sort of help? \_\_\_\_\_

How often do you receive this help? \_\_\_\_\_

### Applicant's ability to live independently

Please complete and sign the consent at the top of the attached Independent Living Form(s) (pages 9–12). You will need to take the Independent Living Form(s) to your Doctor to complete prior to lodging your application for Housing for the Elderly.

The information requested will assist the Council to determine whether you are capable of independent living, such that there would not be any significant risk of harm to yourself or others living in a Housing for the Elderly Complex.



### Next of kin details

Please note that the person/s listed below will be the point of contact for Council should there be any concerns about your wellbeing. Please provide two.

#### Contact One

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

#### Contact Two

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

### Landlord reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

### Character reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

### Legal representation (if you have one)

Solicitor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_



## Financial information

Combine the information if more than one applicant.

Other assets	Applicant One	Applicant Two (if applicable)
Home you own and / or live in; or proceeds from house sale within last five years		
Vehicles		
Boat		
Caravan		
Other (please specify)		
<b>Total</b>		

Savings and investments	Applicant One	Applicant Two (if applicable)
Money in the bank		
Bonus bonds, securities, bonds		
Shares in public listed and private companies		
Loans to other people		
Investments in other assets (holiday homes rental properties etc.)		
Any other investments		
<b>Total</b>		

Main sources of income	Applicant One	Applicant Two (if applicable)
Income Tested Benefit from WINZ		
NZ Superannuation		
Veterans Pension from WINZ		
ACC		
Salary/wages		
Other sources of income		
<b>Total</b>		



Have you and/or your partner sold any property within the last 2 years?    Yes       No

If yes please provide details of the reason for the sale, the amount of the proceeds and what was done with the proceeds. (You may be asked to supply written evidence.)

### Important – The Privacy Act 2020

The Waimakariri District Council undertakes to collect, use and store the information you provide on this form according to the principles of the Privacy Act 2020.

The information may only be used to assess your eligibility for the Waimakariri District Council Housing for the Elderly, for administrative purposes and in emergency situations.

I agree that this information can be used by Waimakariri District Council for the above purposes.

The information you have provided in applying for Housing for the Elderly Unit may be used for a credit and reference and police check in relation to your application.

### Signed

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your authority for this application to proceed.

Applicant 1: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant 2: \_\_\_\_\_ Date: \_\_\_\_\_

### Supporting information required

#### Type of identification provided

Minimum of 1 per applicant. Please provide a copy (preferably photo identification).

Driver's licence       Passport       Birth certificate       Other: \_\_\_\_\_

Bank statements – showing the last four weeks' transactions

If working – A supporting document from your bank, Inland Revenue or Work and Income confirming your income for the last financial year

Independent Living Form – Authorised by the applicant/s and completed by the doctor

### Checklist (please tick)

Have you completed all the relevant sections?

Have you signed the agreement?

Have you signed the Declaration in front of a witness?

Have you included the Independent Living Form(s) completed by your usual doctor for both yourself and your partner?



## Independent living form – Applicant One

I, \_\_\_\_\_ (name of applicant),  
give my consent for my doctor to complete the information requested in the form set out below which I  
will submit to the Waimakariri District Council as part of my Housing for the Elderly Application.

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your  
authority for this application to proceed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

My doctor's name is: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### For the doctor to complete

This applicant has applied for tenancy in one of Council's Housing for the Elderly units. These are in  
groups of small, bedsit, studio single or queen bedroom, self-contained units which require the applicant  
to have the ability to live independently and in close proximity with a community of senior people.

This information requested will assist the Council to determine whether the applicant is capable of  
independent living, such that there would not be any significant risk of harm to the applicant and that  
they will be able to live harmoniously and in a non-disruptive manner with others living in the Housing for  
the Elderly Complex.

Name of patient: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Has the patient suffered from / is suffering from: (please give details)

Stroke      Heart disease or conditions      Respiratory disease

Arthritis or osteoporosis      Psychiatric or nervous disorder      Alcoholism

Other - Please provide details:

Please comment on the following:

Physical and mental condition of the applicant and their ability to cope on their own:



Please confirm whether, in your opinion, the applicant would be able to live harmoniously and in a non-disruptive manner with others living in the Housing for the Elderly Complex and not cause disturbances or friction with others:

Degree of mobility and type of disability (if any):

Knowledge of any issues that could affect the applicant’s ability to live alone, such as alcoholism, violent or threatening behaviour towards others:

Support	Current	Needed
District Nurse		
Psychiatric support		
Home care-givers		
Home-help		
Meals on wheels		
Other		
Smoker    Yes    No		

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your authority for this application to proceed.

Doctor’s signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please note that without sufficient details, the application may not be accepted.*

This form is to be returned to the Applicant who will submit to Council as part of their Housing for the Elderly application.



## Independent living form – Applicant Two

I, \_\_\_\_\_ (name of applicant),  
give my consent for my doctor to complete the information requested in the form set out below which I  
will submit to the Waimakariri District Council as part of my Housing for the Elderly Application.

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your  
authority for this application to proceed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

My doctor's name is: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### For the doctor to complete

This applicant has applied for tenancy in one of Council's Housing for the Elderly units. These are in  
groups of small, bedsit, studio single or queen bedroom, self-contained units which require the applicant  
to have the ability to live independently and in close proximity with a community of senior people.

This information requested will assist the Council to determine whether the applicant is capable of  
independent living, such that there would not be any significant risk of harm to the applicant and that  
they will be able to live harmoniously and in a non-disruptive manner with others living in the Housing for  
the Elderly Complex.

Name of patient: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Has the patient suffered from / is suffering from: (please give details)

Stroke      Heart disease or conditions      Respiratory disease

Arthritis or osteoporosis      Psychiatric or nervous disorder      Alcoholism

Other - Please provide details:

Please comment on the following:

Physical and mental condition of the applicant and their ability to cope on their own:



Please confirm whether, in your opinion, the applicant would be able to live harmoniously and in a non-disruptive manner with others living in the Housing for the Elderly Complex and not cause disturbances or friction with others:

Degree of mobility and type of disability (if any):

Knowledge of any issues that could affect the applicant’s ability to live alone, such as alcoholism, violent or threatening behaviour towards others:

Support	Current	Needed
District Nurse		
Psychiatric support		
Home care-givers		
Home-help		
Meals on wheels		
Other		
Smoker    Yes    No		

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the box below you are giving your authority for this application to proceed.

Doctor’s signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please note that without sufficient details, the application may not be accepted.*

This form is to be returned to the Applicant who will submit to Council as part of their Housing for the Elderly application.



## Declaration

I/We (print name) \_\_\_\_\_

declare that I/we have answered all of the questions asked by the Waimakariri District Council, or the questions have been answered for me, and the information I have given is true and complete.

I/We have read the Privacy Statement included in this form, or the Privacy Statement has been explained to me, and I understand it.

I/We understand that by signing this form I give permission for information about me to be used, given and received, in accordance with the Privacy Statement.

Declared at \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

**PLEASE NOTE** - A signature is not required if you submit this form electronically. By entering your name in the boxes below you are giving your authority for this application to proceed.

Signature of Applicant 1: \_\_\_\_\_

Signature of Applicant 2: \_\_\_\_\_

Before me:

\_\_\_\_\_

Signature of Witness

\_\_\_\_\_

Print Name of Witness



## Information for applicants

### Eligibility criteria

To qualify for housing, the applicant/s must:

- Single applicants must be over the age of 65 years. Where the applicants are a couple, one of the applicants must be over the age of 65 years and the other over 60 years.
- To qualify for housing the applicant(s) must be New Zealand citizens or have New Zealand permanent residency.
- To qualify for housing, the applicant(s) must have assets valued at less than \$10,000 (single applicant) or \$15,000 (couple). Assets exclude furniture, motor vehicle and personal effects.
- Demonstrate the ability to live independently or require minimum supervision and support from community support providers.
- Willingness to adapt to living harmoniously in a close community environment.
- The amount of capital that is available to the applicant(s) to either purchase a property of their own or be able to live in the private rental market.
- Provide a completed and signed Independent Living Form for all applicants.
- Provide appropriate referees that can be verified and contacted by the Council.

### Occupancy

Only one tenant (named on the tenancy agreement) is permitted to reside in a bedsit, studio or single unit.

A maximum of two tenants (named on the tenancy agreement) only are permitted to reside in queen units (previously known as double units).

### Maintenance

The Council maintains the grounds of all complexes.

Flower and vegetable gardens allocated to individual flats are the responsibility of the tenant.

The Council will maintain the buildings and all service requests for repairs should be made to the Waimakariri District Council Customer Services 24 hour phone line 0800 965 468.

### Car parking

The Council provides limited car parking at all complexes. Any additional vehicles and visitors must park outside of the complex.

### Furnishings

The Council supplies fixed floor coverings in the lounge, bedroom, kitchen and bathroom, stoves and washing machines in communal laundries. Curtain rails are provided fixed in position. Curtains, blinds, net curtains, are provided by Council.

### Animals

The Council will permit the Tenant/s to keep a maximum of either one neutered domestic cat, OR one caged bird, OR aquarium fish.



# Housing for the Elderly Policy

## 1. Introduction

The Waimakariri District Council provides affordable housing to the elderly with limited means or other proven needs who live in the District. The services offered contribute to the wellbeing of the tenants. The housing provided by the Council meets all standards acceptable to the Council.

The Waimakariri District Council currently has 112 units for elderly persons, with 46 in Kaiapoi, 50 in Rangiora, 13 in Oxford and 3 in Woodend.

## 2. Policy context

The purpose of this policy is to assist in the provision and management of the housing premises and specifically includes the criteria and processes for:

- Management and administration of Council's Housing for the Elderly portfolio;
- Standards and conditions;
- Asset Management Plan and levels of service;
- Eligibility of applicants applying for housing;
- Allocation criteria;
- Tenancy conditions
- Rental levels;
- Tenants welfare; and
- Future improvements to premises.

## 3. Policy objective

The main objective of this policy is to provide affordable housing to elderly people with limited means. The rental structure of the housing will be set at a level to meet operational costs, including depreciation and the cost of capital improvements. It is intended the depreciation will establish a fund to be used for future replacement and development.

## 4. Policy statement

### 4.1 Eligibility criteria

- (a) Single applicants must be over the age of 65 years. Where the applicants are a couple, one of the applicants must be over the age of 65 years and the other over 60 years.
- (b) Priority allocation of applicants to Housing for the Elderly Units will take into consideration, but not be limited to, the following criteria:
  - (i) Whether the applicant is adequately housed;
  - (ii) The amount of capital that is available to the applicant to purchase a property of their own;
  - (iii) To qualify for housing, the applicant(s) must have assets valued at less than \$10,000 (single applicant) or \$15,000 (couple). Assets exclude furniture, motor vehicle and personal effects;
  - (iv) The applicants ability to be housed in the private rental market bearing in mind their eligibility for the Accommodation Supplement or availability of income related rental options with an approved Community Housing Provider;



- (v) All applicants must either be able to care for themselves or require minimum supervision and support from community support providers. Prior to unit allocation and where appropriate, Council shall require written confirmation, by way of a completed Independent Living Form, from a health professional to ensure tenants are able to live independently;
- (vi) All applicants must demonstrate a willingness to adapt to living harmoniously in a close community environment, either through providing appropriate referees that can be verified and contacted by Council or through the interview process;
- (vii) All applications, at the Council's discretion, shall be subject to a criminal records and credit rating checks.
  - i. Whether or not they own or have owned property within the last two years.
  - ii. To qualify for housing the applicant(s) must be New Zealand citizens or have New Zealand permanent residency.

## **4.2 Application**

Application forms are available from all Council's offices and from the Council's Website. Application forms shall show criteria for eligibility, current rental and location of units.

## **4.3 Allocation**

Housing for the elderly units will be allocated by the administrative staff at the respective service centres. Units are allocated on a "Needs Basis" and not in date order of applications.

- (a) A queen unit will only be offered to a single person if there are no couples on the existing waiting list. Any single person in a queen unit will be required to vacate the queen unit when a couple is allocated it and after a single unit becomes available.
- (b) No pets other than fish, birds and cats (limited to one per resident) are to be kept at the housing for the elderly units.
- (c) No boarders are permitted.
- (d) On-site parking is limited to one vehicle per unit.

## **4.4 Waiting lists**

Council will maintain a waiting list of eligible applicants. The waiting list shall be audited on an annual basis.

## **4.5 False information**

Information from applicants that has been proven as false, shall immediately result in the termination of the application and eligibility.

## **4.6 Change of circumstances**

- (a) Where a couple occupies a queen unit and one of them needs to go into care/hospital temporarily, then the unit may continue to be occupied by the remaining person for as long as the partner is in care/hospital provided it is evident that this is not a permanent situation. The normal rental for a queen unit is to be paid over this period.
- (b) Where a couple occupies a queen unit and one of them needs to go into care/hospital permanently the remaining person will be required to move into a single unit when it becomes available. The remaining tenant's rental will be for a single tenant living in a queen unit (Housing for the Elderly Information - Pensioner Housing application form).
- (c) Where a single person occupies a unit and should he/she be admitted to care/hospital for a temporary period, then the housing for the elderly unit they occupy will be available for them to return to, provided full rental continues to be paid whilst they are in care/hospital.
- (d) Queen units are to be occupied only by the person(s) named on the tenancy agreement. If circumstances change in the relationship and a new partnership is formed, then a new tenancy agreement with Council must be created subject to the eligibility of the new tenant (partner). If the new partner is not eligible for Housing for the Elderly, then tenancy will not be offered and alternative accommodation must be sought. If the tenants continue to reside in the unit and a new tenancy with Council is not formed, then a 90 days' notice will be served.



#### **4.7 Applicant refusal of an offer**

Where a unit is offered and subsequently declined by the applicant without justifiable reason, the applicant may be removed from the list depending on their circumstances.

#### **4.8 Tenancy agreement**

- (a) A tenancy agreement will be signed. Couples will jointly sign the tenancy agreement.
- (b) At tenancy commencement the Council will require two weeks rental in advance.

#### **4.9 Cessation of tenancy**

When tenancy ceases where possible the Council requires written notification and the last day of tenancy is taken as being the day the keys are handed back to the Council. At this time the unit shall be inspected to ensure compliance with tenancy conditions.

#### **4.10 Eviction of tenants**

The Council may end a tenancy if:

- (a) Rent is 21 days in arrears.
- (b) The tenant has assaulted or threatened the landlord, contractor working on the Council's behalf or another resident of the complex or a neighbour. In this situation the common law definition of "assault" applies: "the act of creating apprehension of an imminent harmful or offensive contact with a person. An assault is carried out by a threat of bodily harm coupled with an apparent, present ability to cause the harm."
- (c) The tenant has caused substantial damage to the premises.
- (d) The tenant has seriously breached any conditions of their tenancy agreement conditions.

The tenant exhibits repetitive behaviour that negatively impacts on others.

#### **4.11 Rental structure**

- (a) The Council shall charge a common rental for all its housing for the elderly units, excepting those constructed in 2014 in Kaiapoi where a premium shall be charged.
- (b) Where a single person is occupying a queen unit then the rental shall be the single rate plus half the difference between the queen and single rental costs.

#### **4.12 Electricity charges**

All Tenants shall be responsible for their own supply and use charges relating to electricity and telephone.

#### **4.13 Services provided by the Council:**

- (a) The assets that the Council will supply in its flats are as follows:

Rangiora-Tyler Courts

- Carpet in all flats
- Heating unit
- Washing machines in the separate laundry supplied by the Council
- Stuck-down vinyl in kitchen, bathroom and toilet areas
- Stoves
- Window treatments (drapes/blinds etc)

Rangiora – Durham Courts, Matthew Courts

- Carpet in all flats
- Heating unit
- Stuck-down vinyl in kitchen, bathroom and toilet areas
- Stoves
- Window treatments (drapes/blinds etc)



#### Woodend

- Carpet in all flats
- Heating unit
- Stuck-down vinyl in kitchen, bathroom and toilet areas
- Stoves
- Window treatments (drapes/blinds etc)

#### Kaiapoi (new units)

- Carpet in all flats
- Heat pumps
- Stove/oven
- Washing machine
- Vinyl/tiles on flooring
- Window treatments (drapes/blinds etc)

#### Kaiapoi (renovated)

- Carpet in all flats
- Heating unit
- Stove/oven/extractor
- Vinyl in kitchen, bathroom and toilet areas
- Window treatments (drapes/blinds etc)

#### Kaiapoi (old units)

- Carpet in all flats
- Built-in heaters and/or night-stores
- Stuck-down vinyl in kitchen, bathroom and toilet areas
- Stoves
- Window treatments (drapes/blinds etc)

#### Oxford

- Carpet in all flats
- Heating unit
- Stuck-down vinyl in kitchen, bathroom and toilet areas
- Stoves
- Window treatments (drapes/blinds etc)

(b) All flats are supplied with Waimakariri District Council recycling bins.

(c) The timing of installation for upgrading of units and fittings supplied by Council shall be on a mutually agreed basis.

## 5. Relevant documents, links to legislation, other policies and community outcomes

- Local Government Act 2002 Part 2 s10 and s14 and the Residential Tenancies Act 1986
  - Pensioner Housing Information for New Tenants (TRIM No: 131113105495)
  - Tenancy Agreement Pensioner Housing 2013 (TRIM No: 150911130021)
- The Waimakariri District Council Disability Strategy 2011
- Community Outcomes:
  - There is a safe environment for all
  - The community's needs for health and social services are met
  - People are friendly and caring, creating a strong sense of community in our District
- Housing for the Elderly Application Form (TRIM No: 170515048591)

## 6. Adopted by and date

This policy was adopted by Council on 2 February 2016.

## 7. Review

Review every six years or sooner on request.