



**Barcoo Shire Council**  
 ABN 34668298330  
 6 Perkins Street  
 PO Box 14  
 Jundah Qld 4736  
 T: 07 46586900  
 F: 07 46586137

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 W: [www.barcoo.qld.gov.au](http://www.barcoo.qld.gov.au)

## COUNCIL HOUSING APPLICATION FORM

Town Applied For: \_\_\_\_\_

When do you require the accommodation? \_\_\_\_\_

### APPLICATION DETAILS:

Family Name: \_\_\_\_\_ First Name/s: \_\_\_\_\_

Preferred Title: Mr / Ms / Mrs / Dr \_\_\_\_\_ Previous Name/s: \_\_\_\_\_

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

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Wk: (\_\_\_\_) \_\_\_\_\_ Mb: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Company to be employed at: \_\_\_\_\_

Position: \_\_\_\_\_ Employment Status: \_\_\_\_\_

Employee Number: \_\_\_\_\_ D.O.B \_\_\_\_/\_\_\_\_/\_\_\_\_

Driver's License No: \_\_\_\_\_ State Issued: \_\_\_\_\_ Motor Vehicle Reg. No: \_\_\_\_\_

Motor Vehicle (make/model/year): \_\_\_\_\_

### PARTNER AND/OR DEPENDENTS WHO ARE MAINTAINED AND WILL LIVE PERMANENTLY WITH YOU:

Surname	Other Names	Date of Birth	Relationship	Occupation (If applicable)

### CONTACT DETAILS:

Note: If you will not be at the address you have provided on page 1, please indicate the address(es) and telephone number(s) where you can be contacted with an offer of housing. If the authority is unable to contact you, an offer of accommodation will be given to the next suitable applicant.

Contact Address:	Telephone No:
	( )
	( )
	( )

Next of Kin (not living with you): \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Phone No: \_\_\_\_\_

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

### TYPE OF ACCOMMODATION REQUIRED:

Note: The authority will assess your application in accordance with the Housing Policy. Please contact the Council Office on 07 4658 6900.

Indicate PREFERRED accommodation (you may tick more than one box):

- One Bedroom House
- Two Bedroom House
- Three Bedroom House
- One Bedroom Flat
- Two Bedroom Flat

Other Requirements: \_\_\_\_\_

DO YOU PRESENTLY LIVE WITHIN 50KMS OF THE LOCALITY APPLIED FOR? YES / NO

If yes, do you: Rent / Board / Own / Other (\_\_\_\_\_)

Why are you seeking to move from your present residence?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU PREVIOUSLY LIVED IN ACCOMMODATION PROVIDED BY THE COUNCIL? YES / NO

*Note: Applicants that have an outstanding debt to the Council or have fore caused wilful damage are ineligible for Council's accommodation until the debt is paid.*

If yes, please state the address(es) of the residence(es) and approximate date(s).

Previous Housing Address(es) Provided by Council	Approx. Date Vacated
_____	_____
_____	_____
_____	_____

DO YOU WISH TO KEEP PET(S) AND/OR ANIMALS ON THE AUTHORITY PROPERTY? YES / NO

If YES, list the number and types of pet(s) and/or animals including breed, sex, whether or not desexed, and animal registration number.

\_\_\_\_\_  
\_\_\_\_\_

Note: Tenants in flats are to obtain permission from other tenants residing at these complexes to keep an animal in any common areas.

**DECLARATION/UNDERTAKING:**

- (a) I declare that the information in this application is true and correct. I understand that any false statement or material non-disclosed may result in the termination of any residential tenancy agreement I enter into with the Authority.
- (b) I undertake to notify the Barcoo Shire Council in writing of any details that change materially prior to my being allocated accommodation.

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

Applicant Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_\_\_

FORWARD TO: Chief Executive Officer  
Barcoo Shire Council  
PO Box 14  
JUNDAH QLD 4736

EMAIL: shire@barcoo.qld.gov.au

OR FACSIMILE:(07)46586137

For further information, please contact the Barcoo Shire Council Office.

The Authority will acknowledge this application within 14 working days of receipt.

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**OFFICE USE ONLY:**

Received, processed/acknowledged:

**Date:** \_\_/\_\_/\_\_\_\_ **Officer:** \_\_\_\_\_

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