



The Buller District Council owns and maintains a number of housing units designed to cater for the needs of elderly residents. A total of forty-four units are available in Westport (26), Reefton (16) and Karamea (2).

Council accepts applications for elderly housing at any stage during the year. The minimum age for eligibility is 60 years, unless the application has other proven needs. Applicants must be able to live independently. Council does not at this time have units suitable for people with disabilities or moderate mobility concerns. You will receive an acknowledgement of your eligibility in writing, and will be added to the waiting list for available units.

The properties are almost always fully occupied, although a number generally become available each year. As vacancies arise, applications are reviewed by a confidential housing committee, (made up of Council representatives and members of local health and social support agencies) and offers made at this time. Persons waiting for housing will be contacted by Council once every six months, to ascertain whether they wish to remain on the list.

Units are contained within various sized complexes from two to twelve units. Council undertakes repair and maintenance of the property and grounds. Full tenancy conditions are included in the tenancy agreement.

If you require assistance completing this application, our staff are more than happy to assist you.

**Application for tenancy in a Council elder persons unit**

Date of application: ...../...../.....

I/We wish to apply for tenancy in a Council elderly persons unit

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

Date of birth: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

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

Date of birth: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Length of residence in New Zealand: \_\_\_\_\_ Length of residence in Buller:

\_\_\_\_\_

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

I/We are presently living

- own home
- with relatives
- rented accommodation
- other (please state) \_\_\_\_\_

Name and address of next of kin: \_\_\_\_\_

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What is the present condition of your health? Please describe any physical disabilities you may have that would affect your ability to cook or housekeep for yourself (this information will remain confidential to your application).

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Please attach TWO written references to your application. If these are not available, please provide the names of TWO local citizens who will be able to testify for you.

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

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

Please let us know of any other information relating to your circumstances, which may assist the Committee when your application is being considered.

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**Statutory declaration**

I/We \_\_\_\_\_ (name in full), of  
\_\_\_\_\_ (address in full)

sincerely declare that the information provided on this application is, to the best of my/our knowledge true and correct in every particular. I/We make this solemn declaration conscientiously believing the same to be true, and by virtue of the oaths and Declarations Act 1957.

Declared at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_ Signature of applicant

\_\_\_\_\_ Signature of applicant

Before me \_\_\_\_\_  
Justice of the Peace or other such person authorised to witness such declarations

For further information on Elder Housing applications, please contact the Council Property Officer, or the PA for Operations, on (03) 788 9117