



**TERRITORY HOUSING**

**APPLICATION FOR TRANSFER**

NAME: .....

PRESENT ADDRESS: .....

TELEPHONE: 89 .....

**FAMILY DETAILS:**

**NAME:**

**AGE:**

SPOUSE: .....

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CHILDREN: .....

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**PRESENT ACCOMMODATION:**

NO. OF BEDROOMS:

ACCOMMODATION PREFERRED

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**GENERAL INFORMATION**

Application for Transfer is required to be completed by the legal tenant. Documentation in support of the transfer is to be submitted at the time of lodging the application.

A reasonable attempt will be made to offer the accommodation preferred however there is no guarantee that the accommodation selected will be offered for allocation. Transfers are subject to means testing there are exceptions to the rule your transfer clerk will advise eligibility.

SIGNATURE OF APPLICANT

WITNESS

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