

Community Housing Movement

“Best Neighbour · Walk Together” Community Housing Project-Application Form

Introduction:

This project aims at providing affordable transitional social housing for families who are waiting for the Public Rental Housing (PRH), based on the concept of “Co-living”. The project starts from August 2018 to August 2021. Its ultimate goal is to create a friendly and helpful atmosphere in society, where tenants can share the uses of public areas, support each other and get connected with different stakeholders in the community.

I. Personal Data

Name : (Chinese) _____ (English) _____ Tel. No. : _____ Address : _____
 Residential Period in Hong Kong : _____
 Marital Status : Unmarried Married Separated Divorced Widowed Under Divorce Proceedings
 Reference No. of PRH Application : _____ Application Date : _____
 District : Urban Extended Urban New Territories Islands
 Current Living Condition : Private Permanent Housing Private Temporary Housing Cubicle Apartment / Bedspace
 Subdivided flats Others : _____
 Living Area : _____ ft² Living in Current Flat for _____ Years(or/and) _____ Months Current Rent : _____
 Satisfaction of Living Condition (1-10, 1=Most Dissatisfied, 10=Most Satisfied) : _____
 No. of Neighbours Known in the Building : _____
 How Often do You Contact your Neighbour? Never Seldom Sometimes Usually Always
 Services Received from Other Social Service Organizations? No Yes(Please specify _____)

II. Family Members

	Name (Chinese)	Name (English)	Relationship with Applicant	Gender	Age	Pregnant (Yes/No)	Special Educational Needs (Yes/No)	Criminal Offence (Yes/No)
	-	-	Applicant					
1								
2								
3								
4								

III. Family Income and Assets (Please put a “√” in the appropriate box(es))

Financial Status : Full Grant from School Textbook Assistance by Student Financial Office (Year 2017-18)
 Low-income Family Applied for Working Family Allowance Scheme
 Comprehensive Social Security Assistance/Disability Allowance/Old Age Allowance Yes (\$) No

	Applicant	Family Member 1	Family Member 2	Family Member 3	Family Member 4
Employment Status	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> School	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> School <input type="checkbox"/> Others	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> School <input type="checkbox"/> Others	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> School <input type="checkbox"/> Others	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> School <input type="checkbox"/> Others
Occupation					
Workplace/School and Year					
Average Monthly Income (in the Past 6 Months)	(A)	(B)	(C)	(D)	(E)
Average Monthly Household Income (in the Past 6 Months): (A)+(B)+(C)+(D)+(E)=\$ _____					
Net Asset Value (Relevant Declaration Forms are Required)	<input type="checkbox"/> 1. Deposits \$ _____		<input type="checkbox"/> 2. Insurance \$ _____		<input type="checkbox"/> 3. Stock share \$ _____
	<input type="checkbox"/> 4. Property \$ _____		<input type="checkbox"/> 5. Funds \$ _____		<input type="checkbox"/> 6. Vehicles \$ _____
	<input type="checkbox"/> 7. Others \$ _____				
Total Net Asset Value of the Household (1+2+3+4+5+6+7): \$ _____					

IV. Intention of Moving-in (Please put a “✓” in the appropriate box(es))

1. Expected Moving-in Date: _____
2. Willing to participate in monthly meeting/gathering/activities.
3. Willing to share public area in my flat (except bedroom) for different purposes, such as child care or tutorial.
4. Willing to manage and tidy up the public area every month, following the duty roster with other tenants.
5. Willing to participate in neighbour conference every half year.
6. Willing to participate in at least 2 social activities each year.
7. Willing to share your knowledge, skills or special techniques with others? (Please specify _____)
8. For the sake of safety, none will be invited for visit and stay overnight (except approved member) in the flat.
9. Besides this project, have you ever applied for other housing projects organized by different organization?
Yes with success Yes and still waiting Yes but fail No

V. Declaration of the Applicant and Family Members (Please put a “✓” in the appropriate box(es))

1. We have read carefully and understood all the content of the “Application Guide” before completing the application form. I undertake to comply with the relevant requirements/arrangements contained therein, and the Aberdeen Kai-fong Welfare Association Limited (AKA) has the final decision on the application.
2. Applicant will be arranged for an interview appointment within 1 month after the application, or otherwise, will be considered as unsuccessful. No additional notification will be sent to unsuccessful applicants.
3. As at the date of completing our application form, we have not owned any domestic property in Hong Kong.
4. We agree that AKA, in processing our application, collects our personal data from other relevant government departments, public/private organizations (such as but not limited to financial institutions and banks), and/or any other third party (such as but not limited to employers) possessing our personal data for verification and confirmation of our eligibility.
5. We agree that AKA may, in processing our application, transfer or verify our personal data to/from other relevant departments, organizations or cooperating organizations, following the ordinance made by AKA and the Personal Data (Privacy) Ordinance (Cap. 486)
6. We agree that the information provided in this Application Form may be used by AKA for the purpose of statistical survey or research, advertising or service promotion.
7. All the above particulars finished in this Application Form are true and correct. If we make false statement or furnish false information when applying for transitional social housing, irrespective of whether we shall be prosecuted for or convicted of the offence, or whether the false statement/false information has any impact on the eligibility of the transitional social housing application, AKA may terminate the transitional social housing.
8. We agree to move out from the flat after being successfully allocated to public rental housing.
9. We agree, after successful allocation, the information provided in this Application Form may be used for the purpose of advertising and promoting the Community Housing Project.

Remarks: (i) The applicant and all family members aged 18 or above who are listed in Part 2 are required to sign below.
(ii) The applicant shall be held liable for the data of family member(s) aged below 18 furnished herein.

	Name	HKID/HKBC No.	Signature
Applicant	_____	_____	_____
Family Member 1	_____	_____	_____
Family Member 2	_____	_____	_____
Family Member 3	_____	_____	_____
Family Member 4	_____	_____	_____

Date: _____

VI. Application (For staff only):

1. Information Confirmation Yes No

Staff Signature : _____ Date : _____

Name of Senior Manager : _____ Signature : _____ Date : _____

VII. Supporting Documents of Applicants and Family Members

1. Identity Documents of Applicant and Family Members	
Identity Documents	<p>Copies of:</p> <ul style="list-style-type: none"> ● H.K.I.D (for aged 11 or above) ● Birth Certificate (for aged under 11) <p>For applicant who has been living in Hong Kong for less than 7 years, please submit a copy of his/her One-way Permit/travel document/passport or relevant supporting documents with the official stamp showing his/her initial date of entry to Hong Kong.</p>
Relationship Proof	Copies of birth certificate, notary public certificate or documents issued by the Registration of Persons Office.
Certificate of Marriage	<p>Copies of Certificate of Marriage.</p> <p>Original copy is required for Chinese customary marriage in Hong Kong.</p> <p>For spouse who has not yet been permitted to land in the HKSAR, statutory declaration with Certificate of Marriage and copies of foreign identity card are required.</p> <p>For couples married in China, notary public certificate is required.</p>
Divorced, Single Parents or Widowed	<p>A copy of court order of divorce (for proceedings in Hong Kong, the certificate of making Decree Nisi Absolute (Divorce) (Form 6 or Form 7B).</p> <p>For applications including children under the age of 18, a copy of the court order for the custody of children is needed. If the deletion reason is under divorce proceedings/divorced, please submit relevant copy of divorce documents.</p> <p>If the applicant has children born out of wedlock under the age of 18, the mother should submit the original statutory declaration stating the date of separation after co-habitation, and arrangements for the custody of the child(ren), while the father should submit a copy of the court order for the custody of child(ren).</p> <p>If spouse is deceased, please submit a copy of death certificate.</p>
Proof of Address	For the applicant: copies of document bearing his/her addresses in Chinese or English (e.g. electricity bill, water bill, telephone bill).
Rent Proof	Copies of rent receipt and contract.
Public Rental Housing Application	Notification in written with application code sent by Housing Authority.
With Pregnancy of 16 weeks or more	Original documentary proof issued by a registered medical practitioner stating the expected date of confinement and weeks of pregnancy. A copy of the birth certificate has to be submitted upon the birth of the child.
Disabilities or Chronic Diseases	Copies of medical certificate by registered medical practitioners or accredited registered healthcare professionals
2. Proof of Net Asset of Applicant and Family members (in the Past 6 Months)	
Regular Salaried Employee	Copies of payslip (with company name, stamps, signature of related person), passbook.
Non-regular/Self-employed Salaried Employee	Salary certificate with relevant documents
Comprehensive Social Security Assistance (CSSA)	Copies of certificate of CSSA amount and medical fee-waiving proof
Retirement and Unemployment	Declaration of income source(s) °
Deposit Record	Bank records, such as passbook and monthly statement
Properties	Copies of government rent and rate