

Notification of Vacancy Form – Community Housing

For community housing providers and Department of Housing use only.

Please complete and send this form to your nearest Housing Service Centre within one working day of becoming aware of a vacancy. Further information is provided in the Property vacancy.

| Community housing provider details | | | | | | |
|---|---|-------------------------------|------------|-------------------|--|--|
| Provider name: Contact name: | | | | | | |
| Telephone number: | Felephone number: Email address: | | | | | |
| Vacant property details | | | | | | |
| House/unit number: Street a | ddress: | | | | | |
| Suburb: | | | Post | code: | | |
| Property reference number: | Program: Choose an item. | | | | | |
| Date property vacant: | property ready for allocation: | | | | | |
| Number of entry stairs: Number of internal stairs: | | | | | | |
| Shared facilities: ☐ Yes ☐ No Description (if applicable): | | | | | | |
| Note: If this vacancy is due to a transitional housing transfer, please assist the customer to update their details with the local Housing Service Centre. | | | | | | |
| Multi-unit vacancy details (bulk referral requests) | | | | | | |
| Multi-vacancy notification: ☐ Yes ☐ No | Number of | pedrooms: | | Number of units: | | |
| Number of accessible units: | | | | | | |
| Property details – New Community Rent Scheme property and bulk only | | | | | | |
| Lot number: | t number: Number of floors within building: | | | | | |
| Floor number of unit: Number of | of buildings on- | ite: Number of rooms in unit: | | of rooms in unit: | | |
| Property/dwelling type: | | | | | | |
| Bedrooms (e.g. 1 x 2 bedroom): | | | | | | |
| Community Rent Scheme only | | | | | | |
| Transferring application number: | Is the prope | Is the property: | | | | |
| Replaced/relinquished property address | /reference nun | nber: | | | | |
| Nominations – Transitiona | I housing and | approved lor | ıg-term co | mmunity housing | | |
| Is there a nomination attached: □Yes □No | | Application number: | | | | |
| Note: Long-term and affordable housing providers may only nominate customers where approval has been granted. | | | | | | |
| Common Ground | | | | | | |
| Target group: | | | | | | |
| Other Common Ground specific information relating to the target group: | | | | | | |
| | | | | | | |
| Additional information | | | | | | |
| | | | | | | |
| | | | | | | |
| Authorised by | | | | | | |
| Name: | ame: Position: | | | | | |
| Signature: | Date: | | | | | |

| Property accessibility features | | | | | | | |
|--|--|---|-------------------------------|----------------------------|--|--|--|
| Number of front stairs: | | of front stairs: | Number of rear stairs: | Number of internal stairs: | | | |
| Wheelchair accessible features/modifications | | | | | | | |
| All accessibility features must be ticked for the property to be considered fully wheelchair accessible. | | | | | | | |
| 1. | | No steps from either the footpath or parking area (e.g., garage) to the property. A flat or gentle slope is acceptable. | | | | | |
| 2. | | No steps at entry door, and ramp and/or lift at entry. Provide details: | | | | | |
| 3. | | No changes in floor level (or steps) between rooms. | | | | | |
| 4. | | Key rooms on same levels (e.g., the living room, kitchen, a bathroom, and a bedroom). | | | | | |
| 5. | | Space around the toilet (space required to one side for a wheelchair). | | | | | |
| 6. | | Wheel-under basin in bathroom. | | | | | |
| 7. | | Space for wheelchair to pass through doorways (wider doorways of 800mm minimum clearance). Refer to figure 1 below. The doorways should also have level entry (e.g. be step free). | | | | | |
| 8. | | Enough circulation space for a wheelchair in hallways. For example, minimum hallway width 1000 mm. | | | | | |
| 9. | | Enough space to manoeuvre a wheelchair past furniture, fittings and fixtures (in at least the living room, bedroom and kitchen). | | | | | |
| 10. | | Hobless shower (step free). | | | | | |
| Other modifications | | | | | | | |
| 11. | | Entry doorways have been wi | dened (minimum of 800mm wide) | | | | |
| 12. | | Shower recess (with small hob). | | | | | |
| 13. | | Combined bathroom (toilet, shower and vanity are in the same room). | | | | | |
| 14. | | Lowered kitchen benches. | | | | | |
| 15. | | Other modification/s installed, please specify: | | | | | |
| | | | | | | | |

Please note: Service providers/Housing Services officers do not need to measure all access features of a property to determine if it is wheelchair accessible. However, it is recommended that measurements of bedroom and bathroom/toilet door are taken to ensure wheelchair accessibility.

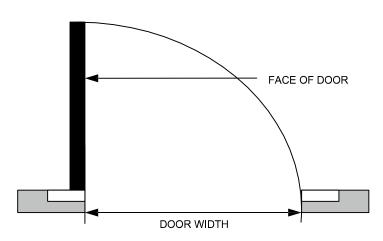


Figure 1 – Door widths must be measured to the clear opening dimensions. The measurement is from the face of the fully open door to the frame, not the width of the door itself