CITY OF BULAWAYO

HOUSING AND COMMUNITY SERVICES DEPARTMENT

HOUSING APPLICATION FORM

<u>NB</u>: This application must be renewed every twelve (12) months for applicant's name to remain on the waiting list. Upon renewal a fee is chargeable.

Name of applicant

All answers to be verified and documentary proof produced where required.

IDENTIFICATION OF APPLICANT

A.

1.

	2.	Application	on Number					
	3.	Priority N	lumber					
	4.	Application	on/Renewal Date					
	5.	I.D. Num	ber					
	5(a)	District						
	6.	Residential Address						
	7.	Business/Postal Address						
	8.	Years Resident in Bulawayo						
	В.	SOCIO ECONOMIC CHARACTERISTICS						
	9.	Date of Birth of Applicant						
	9(a)	Place/District						
	10.	Sex						
	12.	Marriage	Marriage Certificate Number					
		Place/Dat	e of Issue					
	13.	Details Relating to Wife/Spouse:						
		Name I.D. Number						
			District					
		Maiden Name						
	14.	Details of						
NAME			RELATIONSHIP APPLICANT	DATE OF BIRTH	OCCUPATION/SCHOOL	SEX		
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2								
3								
1								
5								
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	INC	OME AND OCCUPATION						
	Applicant's occupation							
	Nam	Name of Employer.						
	Addr	ress of Employer	Phone					
	Date	17. Basic Salary/Wage p/m\$						
	Num	Number of years in the above employment						
	Spouse's Occupation							
	Name of Employer							
	Addr	ress of Employer	Phone					
	Date	Engaged	24. Basic Salary/Wage p/m\$					
	Num	ber of years in the above employm	nent					
	PRE	VIOUS WORK PLACE(S)	NUMBER OF YEARS					
	OTHER INFORMATION							
	(a) Do You or Your Spouse own a house in Zimbabwe? Yes/No							
	(b) If Yes, give address of property							
'.	(a) Have You or Your Spouse registered for accommodation anywhere else in Zimbabwe? Yes/No							
	(b)	If Yes, indicate	and give					
	(c)	Address						
	<u>IMP</u>	<u>ORTANT</u>						
	Please note that any applicant who gives False or Misleading information be Disqualified from consideration for a house or agreement nullified or evicted is allocation has already been made.							
	<u>DECLARATION</u>							
	I declare that the above information is correct and true.							
	Signature Date							
R	OFFI	CE USE ONLY						
	Application Approved/Not Approved (Delete Inapplicable)							
	Comments							
	Infor	mation verified Signed	Date					
	Desig	gnation						