

Community housing property return request form

This form to be completed by Community Housing Providers that wish to apply to return a SACHA Funded Asset (previously referred to as debentured property) to the SA Housing Authority.

Name of Community Housing Provider:	g				
Contact person:					
	Phone		Mobile		
Contact person email addres	s:				
Address of property to be returned:			No. of	bedrooms:	
Please list any disability or other modification features at the property:	t				
Please briefly advise the reason/s for wanting to return the property:					
Time property vacant (in wee	eks):	Date property became	/will become vacant:		
Date of final meter reading:	Gas	/ /	Electricity	/ /	
Company doing final reading	: Gas		Electricity		
Have you discussed the return of this property with SA Housing Authority? Yes No Please provide details below of the maintenance undertaken on this property to a standard agreed by the SA Housing Authority					
	of the mair	ntenance undertaken on	this property to a standa	rd agreed by the SA Housing	
	[;	ntenance undertaken on Status (complete/pending)	this property to a standa	rd agreed by the SA Housing Responsibility (CHP/SA Housing Authority)	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status		Responsibility	
Authority	[;	Status	Target Date / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /	Responsibility	
Authority	[;	Status	Target Date / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /	Responsibility	
Authority	[;	Status	Target Date / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / / /	Responsibility	

OFFICIAL

Со	mmunity Housing Provider Declaration:					
1.	 We have attached evidence of prior delegations being in place enabling the decision to be made by relevant Officers, and proof of the meeting between those Officers where the decision was made showing the approval by special resolution to return the property and transfer the title into the name of the South Australian Housing Trust; OR 					
	For volunteer member-tenant managed providers – We have attached a copy of our meeting minutes showing the approval by special resolution to return the property and transfer the title into the name of the South Australian Housing Trust.					
2.	We understand that:					
	we must maintain the property until the actual transfer / settlement date.					
] we will execute the required signatures and seal on the transfer documents without undue delay.					
	a replacement property cannot be committed					
	the property must be returned in a standard as determined by the SA Housing Authority, generally as per the Property Transaction Policy and Property Disposal Procedure (in a condition that would allow the property to be let to another tenant). We understand that at <i>minimum</i> the property must be returned clean, tidy, secure, free of rubbish (inside and outside), grass cut and garden tidy despite the circumstances of the return.					
	removal of <u>non-approved</u> tenant alterations and additions must be undertaken prior to return.					
	we will advise the SA Housing Authority when the required vacancy work is complete.					
	we must ensure the tenant has organised final readings of all meters, and that services to the property will be disconnected prior to the nominated title transfer date.					
	we understand it is the responsibility of the Community Housing Provider to pay all rates and SA Water accounts until the settlement date.					
	we confirm that final readings have been obtained for gas and/or electricity utilities.					
	we will retain the property keys until the SA Housing Authority requests them when the property has been returned to a standard as determined by the SA Housing Authority.					
	if the SA Housing Authority is required to expend funds to meet the above conditions, we understand we will					
	be charged accordingly for the necessary work.					
	TE: All fields on this form must be completed before the SA Housing Authority will process this request.					
	be signed by two authorised officers of the Community Housing Provider:					
Sig	nature 1 Community Housing Provider Seal					
Dat	te / /					
Sig	nature 2					
Dat	te / /					
	r Office Use Only:					
Dat	te Received / /					
Off	icer Name who Received:					
Not	tes:					
Off	Officer Approved (Name):					
Sig	nature:					
Dat	te / /					

Return to: housingpartnerships@sa.gov.au