

Please return your completed form to:
YourPlace Housing Ltd 338-340 Tapleys Hill Road Seaton SA 5023 complaintsandappeals@yourplacehousing.com.au

Your Details			
Surname		First Name	
Street Address			
Suburb		Postcode	
Mobile		Home/Work	
Email			

Please indicate what decision you want to appeal. Click/tick the relevant box		
<input type="checkbox"/> Assessment of eligibility for housing	<input type="checkbox"/> Modification to a property for disability/medical reasons only	<input type="checkbox"/> Transfer Request
<input type="checkbox"/> Permission to keep a pet	<input type="checkbox"/> Rent calculation, water, or other charges	<input type="checkbox"/> Additional occupant applications
<input type="checkbox"/> Property maintenance or refurbishments	<input type="checkbox"/> Other, please specify	

<p>Please tell us why you want to appeal this decision and anything we should be aware of so we can review our decision based on all the facts. You can also attach copies of any relevant documents, letters, etc that supports your application</p>

Have you already discussed this with a YourPlace Housing staff member?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please tell us when this occurred and who you dealt with.	

Would you like another person to act as a representative on your behalf, or someone else to know the details of your review (for example a support worker)?			
Name of advocate		Relationship/Agency	
Telephone		Email	

Please sign your appeal here			
Signed		Date	