



# Northern Peninsula Area Regional Council

P.O. Box 200 Bamaga, Qld,4876

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ABN: 27 853 926 592

## Proof of Residency and Indigenous Identity

Please enter the name of your parents and grandparents below.

Grandmother	Grandfather	Grandmother	Grandfather
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother		Father	
<input type="text"/>		<input type="text"/>	
You			
<input type="text"/>			

How long have you stayed in the NPA region? – Days  Months  Years

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Divisional Councillor

I \_\_\_\_\_ confirm that the above information is true and correct and can verify that the applicant \_\_\_\_\_ has traditional blood ties to the Northern Peninsula Area Region and can apply for Social Housing Assistance from Northern Peninsula Area Regional Council.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_