

Date:

Religion:

SCRV is an SDA organisation and preference is given to SDAs

Royce Haven:

1 Bedroom Units

Sea Breeze:

2 Bedroom Units

Banyan Tree:

2 Bedroom Units

(Tick Preference/s)

Applicant's Name:

Applicant's ID Number:

Spouse's Name:

Spouse's ID Number:

\* Please attach copy of IDs

Work Experience:

Husband

(Employment history)

Wife

Physical Address:

(Place of residence)

\* Please attached proof of current address

Contact Details:

|             | Applicant | Spouse |
|-------------|-----------|--------|
| Cell appl   |           |        |
| Cell spouse |           |        |
| Email       |           |        |
| Email       |           |        |

Marital Status

Married

Single

Widow/er

Retired

Yes

No

Age:

Physical Condition:

(Excellent (E), Very good (VG), Good (G), Poor (P))

\* Please attach a note from your doctor to confirm you are able to function independantly.

If not retired, anticipated retirement date:

Date when you require the accommodation:

(Subject to waiting lists, rules and availability of units)

Main source of income:

Amount: .....

Do you have to sell your house in order to purchase a Unit?

..... Pets:

Qty: .....

Type: .....

Children:

Next of Kin contact details:

Additional Information you would like us to know:

The fact that you have submitted the application form is not a guarantee that a unit will be allocated to you, and that all applications are evaluated according to the owner's criteria.

Upon completion of form please email to [royseaban@gmail.com](mailto:royseaban@gmail.com)Yearly Administration Fee of **R100** per complex is required - contact us for bank details.

P.T.O.

## **POPIA (Protection of Personal Information Act) Consent**

By completing this form, I acknowledge and consent to the collection, use, and processing of my personal information (including copies of ID, proof of address, medical information, financial details, and personal background) by South Coast Retirement Village (SCRV) in accordance with the Protection of Personal Information Act, 4 of 2013 ("POPIA").

My personal information will be used for the following purposes:

- \* To process and evaluate my application for accommodation.
- \* To determine whether I would be a suitable resident in relation to the existing community.
- \* To maintain waiting lists and manage ongoing communication.
- \* For administrative and compliance purposes.

SCRV undertakes to keep my information secure and confidential. My personal information will not be disclosed to third parties without my consent, unless required by law or regulation.

I understand that I have the right to:

- \* Request access to the personal information held about me.
- \* Correct or update my information.
- \* Withdraw my consent and request deletion of my information (subject to legal or contractual requirements).

I have read and agree to abide by the rules pertaining to the waiting lists:

By signing this form, I give my voluntary and informed consent for South Coast Retirement Villages to process my personal information for the above purposes.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_