

**Extended Stay of a  
Visitor/Family Member/Friend**



<b>Your Name</b>	
<b>Your Address</b>	

I am seeking approval for one or more person/s to stay at my property for an extended period of time.

**The person/s Name/s**

**Period of stay**

**Date of Arrival**

**Date of Departure**

**List the reason for  
the extended stay**

- I understand Women's Housing Company Ltd has a policy regarding visitors who stay for extended periods. [\(Please note that you have the right to request a copy of this policy\).](#)
- I understand that I may lose my rental subsidy and pay market rent for my property for any period I have an extended stay of a visitor/s.
- I understand that I may be in breach of my tenancy if my visitor/s do not leave my premises when so requested by WHC.
- I understand that under tenancy law I am responsible at all times for the behaviour of visitors to my premises, and that inappropriate behaviour or action caused by them may result in a breach of my tenancy agreement.

**Your Signature**

**Date**