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Rental Application No.

Housing Act 2003
Application for housing assistance pursuant to
Section 26A of the Housing Regulation 2003

Application for Housing Assistance

A range of housing assistance is provided by the Department of Housing and Public Works to eligible Queenslanders for the duration of their housing need. The types of housing assistance available include departmentally-managed housing, long term community housing and Indigenous Council community housing on discrete Indigenous communities.

How to apply for housing assistance:

You can apply in the following ways:

• contact your nearest Housing Service Centre to arrange an appointment to discuss your eligibility and housing needs. At the interview, you will complete and sign an Application for Housing Assistance form. Housing Service Centre staff will advise which documents you need to bring to the interview, for example, proof of identification forms, evidence of your household's income and assets, citizenship or residency, and any specific housing needs, etc.

OR

complete this application form and send it to your nearest Housing Service Centre. The department will contact you to arrange an appointment to discuss your application.

OR

apply through community housing providers who will then send the application to the department on your behalf.

OR

• If you are living on one of the 34 discrete Indigenous communities and you are applying to live on the same Indigenous community in Indigenous Council community housing, you can contact your Council housing officer or your nearest Housing Service Centre to discuss lodging an application.

Important information

- Lodgement of an application for housing assistance is not a guarantee that the department will be able to assist you. Your
 eligibility, level of housing need and the type of housing assistance you are eligible for will be assessed based on
 the information you provide at the interview and / or in this application form.
- You must be eligible for housing assistance when you apply and continue to be eligible until being offered assistance
- Fact sheets on housing assistance are available from any Housing Service Centre or from the department's website at: www.hpw.qld.gov.au

If you wish to complete this application form:

- Read all the questions carefully and complete this application in full.
- Write in block letters (for example: JOHN SMITH).
- Show your answer with a tick, where there are Yes/No boxes (for example).
- Attach any supporting documentation if required. Provide proof of income and assets for each person with an independent income, for example, Centrelink Income Statement, Employers Declaration, etc.
- Sign the declaration and bring in necessary identification with this application form or have necessary identification signed by a witness if you are mailing this application form.
- Have this application form sighted and signed by an appropriate witness.

www.hpw.qld.gov.au 1 Version 6 November 2012

What is your first language spoken at home?						
Do you require an interpreter for an interview?		Yes		No]
If you would like to talk about your application in a language We can also arrange a signing interpreter for people with he arrange either of these services. Language interpreter Signing interpreter Language	aring difficulties. Please tick t					u.
Pollsh/po polsku Osoby, które do wypełnienia tego formularza potrzebują pomocy flumacza, proszo skontaktowanie się z najbiliższym urzędem Ministerstwa Spraw Mieszkaniowych. Russlan/ Русский язык Если вы нуждаетесь в помощи переводчика при заполнении данной формы, обратитесь пожалуйста а местный Департамент по Обеспечению Жильём. Samoan/Samoan Аfai e te manacmia se faamatalaupu e fesoascani i a ce i le faatumuina o le pepa faamolemole faafescotal le ofisa o le Matagaluega o Fale pito lata ane i lo outou p Serblan/Српски Уколико вам је потребна помоћ преводиоца како бисте испунили овај формут молимо контактирајте покалну канцеларију Одсека за стамбене послове. Spanlat/Español Si necesita un intérprete para poder completar este formulario, póngase en contaroficina del Department of Housing de su zona. Filipino/Tagalog Kung kallangan mo ng isang interprete upang matulungan kang kumpletohin ang ito, makipag-alam sa iyong lokal na opisina ng Kagawaran ng Pabahay. Vietnamese/Tiéng Việt Néu cần một thông ngôn viên để giúp quý vị điền đơn này, xin liên lạc với văn phổ Gia Cư dịa phương của quý vị.	Polish/po polsku Osoby, które do wypełnienia tego form skontaktowanie się z najbliższym urzę Russlan/ Русский изънк Если вы нуждветесь в помощи пере обратитесь пожагуйста в местный д. Itenei, i	водчика при заполненни данной фо водчика при заполненни данной фо вепартамент по Обеспечению Жиль- обеспечению Жиль- обеспечению Жиль- обеспечению Жиль- обеспечению Жиль- обеспечению Мина в 10 о обеспечению Мина	proszone są o wych. proszone są o wych. ppmiu, dłw. pppa lenel, ultou pitonuu. popmynap, se.			
What type of social housing do you want to apply for? (Please tick applicable boxes). All social housing - this includes both departmentally-managed housing (social housing provided directly by the department, including Aboriginal and Torres Strait Islander housing) and community managed housing (social housing provided and managed by registered housing providers, including affordable housing). Note - listing for both types of housing will provide you with the most housing options. Departmentally - managed housing only Community - managed housing only Indigenous Council community housing on one of the 34 discrete Indigenous communities in Queensland Note: if you want to apply for Indigenous Council housing on a discrete Indigenous community, you must be already living on that same Indigenous community. If you are not already living on the community you want to apply for, you must also list for housing in other locations.						

Do you need assistance wh	en making de	ecisions?					
Is there a person who assists financial matters? This perso advocate.							
Yes No No							
If yes, please complete from the department's	e and attach o website <u>www</u>	one of these fo	rms which are ava au.	ilable from your	nearest Ho	using Service Cer	ntre (
 Formal Guardian and appointed by the Que Tribunal (GAAT), or 							
 Informal Decision-ma guardian and/or admi 				nd or advocate a	cting in the	capacity of an info	orma
Your address and contact of	letails.						
What is your current addre	ess?						
					Postcode		
What is your mailing addre	ess?						
					Postcode		
Telephone	Private			Business			
Тетернопе	Mobile			Note - the		t may also send y	ou
				— information	n by SMS (t	ext messages).	
	Email						
Please indicate the way yo (eg telephone, letter, SMS, ema							
You must advise us of any	change to th	is address or	your application	may be cancel	lled.		
Disease was side the name	f a nalativa fu	:	ingtion with a dif		4	th	
Please provide the name o contact if unable to contact			isation with a un	ierent address	to you, will	om me departme	ent C
Person/organisation							
Address							
					Postco	ode	
Telephone	Private / Mo	obile		Busin	ess		
Are you, or any person to b	e housed wit	h you, a curre	ently living in a Do	epartment of H	ousing and		
property?						Yes No	o
If yes, name of person							

Date occupied (if known)

Address of property

Account number (if known)

6	Are you, or any person to be housed with you, currently living in community-managed housing? Yes No	
	If yes, name of person	
	Address of property	
	Address of property	
	Household member role	
	Name of the community housing provider	
	Date occupied (if known)	
7	Are you, or any person to be housed with you, currently living in Indigenous Council community housing? Yes No	
	If yes, name of person	
	Which Indigenous community?	
	Address of property	
	Household member role	
	Date occupied (if known)	
8	Have you, or any person to be housed with you, applied for or been assisted in the past in Queensland with:	
	Public rental housing First Time Yes No Yes No	
	Aboriginal and Torres Strait Islander housing Yes No Yes No	
	Bond loan assistance Yes No Yes No	
	Housing loan assistance Yes No Yes No	
	Community-managed housing Yes No Yes No	
I	Indigenous community housing Yes No Yes No	
	Indigenous Council community housing Yes No Yes No	
	If 'yes', name of person/s	
	Address of property	
	Date vacated property Account number (if known)	
	Name of community or local government (including Indigenous Councils) housing provider	
	If there is not enough space, please provide similar details for each person on a separate page and attach to this application.	
9	Have you, or any person to be housed with you, been known by another name/s in the past?	
	(e.g. name changed by deed poll, marriage or divorce) Yes No	
	If yes, please list the name of each person and their past names	

Household member details

Please provide details of all of the people to be housed. Please include all adults and children.

Household member	No. 1	No. 2	No. 3	No. 4
Title				
Surname				
First name /s				
Middle name				
Date of birth				
Male / female				
Relationship to applicant	Applicant			
Centrelink's Customer Reference Number (CRN) or Department of Veteran Affairs (DVA) Reference Number				
We are committed to improving housing reporting and planning purposes and/or for each household member please to	to determine your el	igibility for housing a	assistance.	s collected for
Aboriginal origin				
Torres Strait Islander origin				
Australian South Sea Islander origin				
Another cultural or linguistic background				
None of the above				
What is your residency status in Aus	tralia? (please tick	the option that applie	es for each person's re	sidency status)
Australian citizen				
Permanent resident				
Have a permanent protection visa				
Have a Resolution of Status visa				
Have a Bridging Visa and have applied for a permanent protection visa				
On a Bridging Visa and have applied for a Resolution of Status visa				
Have applied for permanent residency				
Have a Temporary Protection Visa				
Not a permanent resident				



You must provide evidence of your residency status e.g. Birth Certificate /from an Australian State or Territory or Australian Passport or Australian Citizenship certificate or documents from Department of Immigration and Citizenship (DIAC) verifying your citizenship status (e.g. letter detailing residency or visa status or Certificate of Resident Status or Certificate of Identity etc) or permanent residency stamp in applicant's Passport etc.

Household member details continued...

Use this page for additional household members.

Household member	No. 5	No. 6	No. 7	No. 8
Title				
Surname				
First name / s				
Middle name				
Date of birth				
Male/female				
Relationship to applicant				
Centrelink's Customer Reference Number (CRN) or Department of Veteran Affairs (DVA) Reference Number				
We are committed to improving housing reporting and planning purposes and/or For each household member please	to determine your eli	igibility for housing a		s collected for
Aboriginal origin				
Torres Strait Islander origin				
Australian South Sea Islander origin				
Another cultural or linguistic background				
None of the above				
What is your residency status in Aus	tralia? (please tick	the option that applie	es for each person's re	sidency status)
Australian citizen				
Permanent resident				
Have a permanent protection visa				
Have a Resolution of Status visa				
Have a Bridging Visa and have applied for a permanent protection visa				
On a Bridging Visa and have applied for a Resolution of Status visa				
Have applied for permanent residency				
Have a Temporary Protection Visa				
Not a permanent resident				



You must provide evidence of your residency status e.g. Birth Certificate from an Australian State or Territory or Australian Passport or Australian Citizenship certificate or documents from Department of Immigration and Citizenship (DIAC) verifying your citizenship status (e.g. letter detailing residency or visa status or Certificate of Resident Status or Certificate of Identity etc) or permanent residency stamp in applicant's Passport etc



Household income and asset information

Please provide details of all of the income and asset information for **each** household member.



Please attach evidence of your income and assets to the back of this application.

Note - the department can obtain your income and assets details electronically from Centrelink with your consent. Please complete an Income Confirmation Service Consent Form and return it with this form. Contact your nearest Housing Service Centre for this form or visit the department's website www.hpw.qld.gov.au.

Household member	No.1	No. 2	No. 3	No. 4
Surname				
First name / s				
Income \$	\$	\$	\$	\$
Income type (wages, pension, allowance, family payments)				
Other income (for example, maintenance, superannuation, etc.)				
Do you own, or any household	I member, or part ow	n property either in	Australia or oversea	s?
Please tick all options that apphousehold do not own that type o		on that you do not tick	, you are declaring that	you and your
Residential (including a house, flat, unit, townhouse or manufactured home)				
Vacant land of any type (including residential, commercial or industrial etc.)				
Live-aboard boat, caravan, mobile home, donga or cabin				
Industrial property				
Commercial property				
If yes to any of the above	e, complete the infor	mation below and a	ttach supporting doc	umentation.
Name of person who owns	or part owns the prope	rty		
Address of property				
				Postcode
Amount of property owned	e.g. 50%			
Current value of the property	, \$		Date of ownership	/ /
Is the property mortgaged? Yes No If yes, amount of mortgage owing \$				
Details of the property owner	rship			

Household income and asset information continued

Use this page for additional household members if required.



Household member

Please attach evidence of your income and assets to the back of this application. No. 5

No. 7

No. 6

No. 8

Surname				
First name / s				
Income \$	\$	\$	\$	\$
Income type (wages, pension, allowance, family payments)				
Other income (for example, maintenance, superannuation, etc.)				
Do you own, or any household me	ember. or part own	property either in A	ustralia or overse	eas?
Please tick ☑ all options that apply. household do not own that type of pr	Note - for any option			
Residential (including a house, flat, unit, townhouse or manufactured home)				
Vacant land of any type (including residential, commercial or industrial etc.)				
Live-aboard boat, caravan, mobile home, donga or cabin				
Industrial property				
Commercial property				
If yes to any of the above, c	omplete the informa	ation below and atta	ch supporting do	ocumentation.
Name of person who owns or p	part owns the property			
Address of property				
			Postco	ode
Amount of property owned e.g	. 50%			
Current value of the property	\$	D	ate of ownership	/ /
Is the property mortgaged? Yes No If yes, amount of mortgage owing				
Details of the property ownership				

Household income and asset information continued

If you, or any household member, has \underline{any} of the following assets, please detail the value of the assets below.

Note - for any option that you do not complete in the table below, you are declaring that you and your household do not have that type of asset.



Please attach evidence of all assets owned by each person this application.

Household member	No.1	No.2	No.3	No.4
Balance of all cash and bank accounts (including bank, building society, credit union and interest free accounts)	\$	\$	\$	\$
Deposits (including interest free bearing deposits, fixed deposits etc)	\$	\$	\$	\$
Bonds	\$	\$	\$	\$
Debentures	\$	\$	\$	\$
Shares (Australian and international)	\$	\$	\$	\$
Property Trusts	\$	\$	\$	\$
Managed investments of any type including friendly society bonds	\$	\$	\$	\$
Superannuation - allocated pension / s (if you were born before 1 July 1960)	\$	\$	\$	\$
Superannuation lump sum payment/s (if you were born before 1 July 1960)	\$	\$	\$	\$
Proceeds from a property sale	\$	\$	\$	\$
Share of a property settlement	\$	\$	\$	\$

Household income and asset information continued - use this page for additional household members if required If you, or any household member, has <u>any</u> of the following assets, please detail the value of the assets below.

Note - for any option that you do not complete in the table below, you are declaring that you and your household do not have that type of asset.



Please attach evidence of all assets owned by each person this application.

Household member	No.5	No.6	No.7	No.8
Balance of all cash and bank accounts (including bank, building society, credit union and interest free accounts)	\$	\$	\$	\$
Deposits (including interest free bearing deposits, fixed deposits etc)	\$	\$	\$	\$
Bonds	\$	\$	\$	\$
Debentures	\$	\$	\$	\$
Shares (Australian and international)	\$	\$	\$	\$
Property Trusts	\$	\$	\$	\$
Managed investments of any type including friendly society bonds	\$	\$	\$	\$
Superannuation - allocated pension / s (if you were born before 1 July 1960)	\$	\$	\$	\$
Superannuation - lump sum payment/s (if you were born before 1 July 1960)	\$	\$	\$	\$
Proceeds from a property sale	\$	\$	\$	\$
Share of a property settlement	\$	\$	\$	\$

10									
13	Are any of the household members on the application	on expecting a child? Yes No							
	If yes, name of the person/s								
	Expected date of delivery (due date)	Note - a letter from their doctor is required.							
14	Are you applying for housing assistance on any of the following grounds?								
	Note - please tick all grounds which apply to you are declaring that you and your household are not apply to you	ur household. Note - if you do not tick any of the grounds below, you pplying for housing for any of these reasons.							
	Referral from Disability Services or a non- government support provider - Housing with Shared Support (HwSS) program to fill an individ	You are in contact with Child Safety Services for assistance with your family							
	vacancy in an existing household	You are exiting a correctional facility							
	Referral from Disability Services or a non- government support provider - Housing with Shared Support (HwSS) program to be a member	You have been the victim of a natural disaster affecting your current housing							
	a new household	You have been the victim of a major crime affecting your current housing							
	You have a disability and/or mental illness and succession planning is proceeding either through the establishment of a Special Disability Trust or								
	through documentation from Disability Services, Queensland Health or a non-government provide confirming eligibility for special disability services establish independent living	Referral from a support provider as receiving assistance under the Street to Home or 50 Lives: 50							
	Referral from Child Safety Services as the safety a child in your care is at risk	y of None of the above							
15	Which of the following best describes your current he	ousing situation?							
	Note - you can tick more than one if the people I	listed on your application are not currently living together.							
	Public housing or Aboriginal and Torres Strait Isla housing	lander Private boarding house							
	Community Housing - including long term community housing, affordable housing and longer term Community Housing and longer term Community Housing and Indiana.								
	Managed Studio Units	Caravan park							
	Temporary and Supported accommodation - including refuges, shelters or emergency, crisis a	· —							
	housing delivered by specialist homelessness se people who are homeless or at risk of homelessr								
	Community Housing - transitional (including Com Rent Scheme, Same House Different Landlord a	and ————————————————————————————————————							
	transitional Community Managed Studio Units pr	rogram) Living on the street or sleeping in the park							
	Medical institution/facility or hospital and have no housing to go to	o other Living or squatting in a derelict, makeshift or illegal building							
	Correctional facility	Living with family or friends							
	Own home	Living on a boat							
	Renting privately (including sharing a house/flat)	Living in Indigenous council housing							
	Boarding privately								

16	How many people live in yo	ur current housi	ng? Plea	se tick	the app	licable bo	x.		
	□ 0 □ 1 □ 2	☐ 3 ☐ 4	□ 5	□ 6	□ 7		han 7, please s ve in your curr		
	How many bedrooms does	the appli	cable box.						
	□ 0 □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 If more than 7, please start bedrooms are in your cur								
	Please complete the follow If you are not only applying How many different family	g to live on the sa	ame Indig	genous c	ommunity t	hat you a	re already livin		
17	Is everybody listed on this application currently living with you? If no, please list the name of each person not living with you and the reason why. Please also include the amount of rent they are paying for where they are living now and the amount of Rent Assistance they receive (if any). Please attach evidence of the rent paid by the household members not living with you (e.g. rent receipts or letter from the landlord/lessor etc.								
	Name of person	Reason why	person is with yo		ntly living	Week	ly rent/board		ekly Rent ance received
						\$.00	\$.00
						\$.00	\$.00
						\$.00	\$.00
						\$.00	\$.00
					Total	\$.00	\$.00

For the people listed on the application who are living together now, what is the weekly rent or board payment that each person pays and the amount of Rent Assistance they receive (if any)?

Please attach evidence of the rent paid by the people listed on this application who are living together now (e.g. rent receipts or letter from the landlord/lessor etc).

	Weekly rent/ board		Weekly Rent Assistance received			Weekly rent/ board		Weekly Rent Assistance received	
Person 1	\$.00	\$.00	Person 5	\$.00	\$.00
Person 2	\$.00	\$.00	Person 6	\$.00	\$.00
Person 3	\$	00	\$	00	Person 7	\$	00	\$	00
Person 4	\$.00	\$.00	Person 8	\$.00	\$.00
					TOTAL	\$.00	\$.00

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м		ь.		ч	
т.	٩		F.	А	

Are any of the people listed on your application having difficulties with remaining in their current housing due to any of the following reasons? Note - please tick all situations that apply to your household. Note - if you do not tick any of the reasons below, you are declaring that you and your household do not have these difficulties with remaining in your current housing. The boarding house has closed or is about to close A household member's medical condition and/or disability is seriously aggravated by the current housing which cannot be readily modified to suit their needs The features of the current housing restrict household The hostel has closed or is about to close members from doing daily living activities (e.g. bathing, mobility) The current housing is overcrowded causing serious The caravan park has closed or is about to close long term safety risks Household is facing immediate eviction and has no The current housing lacks essential facilities (e.g. other housing options cooking, bathroom, water supply, heating, lighting etc) You need to leave your current housing due to a The current housing's structural condition could lead to domestic violence situation serious health and safety risks You need to leave your current housing due to a risk You are living in housing with shared facilities which of violence from another household member, no longer meets your needs (e.g. private boarding neighbour or community member house, hostel, caravan park, hotel, motel or community managed social housing) and you want to apply for self There has been an irreversible family breakdown contained housing resulting in the person being asked to live elsewhere (not domestic violence situation) You are living with family and friends on a None of the above temporary basis and are at risk of homelessness The family unit needs to reunite as they are currently living apart If anyone listed on the application needs access to a specific location, please tick one or more of the options that best describes the reasons. Note - please tick | all grounds which apply to your household. Note - if you do not tick any of the grounds below, you are declaring that you and your household do not need housing in a specific location for any of these reasons. Please attach evidence supporting the reason the applicant or household member requires access to a specific location. Talk to your nearest Housing Service Centre office about the types of evidence required. To gain or maintain regular access to a child or children in foster care To enable a child or children to be returned to the custody of a household member To gain or maintain regular access to a child or children who are in the custody or care of another person To prevent a child or children being removed from the custody of a household member To enable the shared care or a child or children To ensure access to a specialist educational facility To ensure access to a frequently needed medical facility or medical services required by a household member To ensure access to support services required by a household member for daily living activities To ensure access to accessible transport services To receive family or informal support on a regular basis that is necessary for daily living To take up a firm offer of permanent employment (not casual or temporary employment or a promotion) To relocate under the Structured Training and Employment Program (STEP) program or Community Development Employment Program (CDEP) or other Commonwealth Government employment program for Indigenous people

You are an Aboriginal and/or Torres Strait Islander person who is already living on a discrete Indigenous community and you need to move to another house on the same Indigenous community for cultural reasons e.g. a death in the

You are an Aboriginal and/or Torres Strait Islander person needing to move for cultural reasons

family or house, or to be located away from other people of a different kin network.

_	ou did not tick any of the reasons in Question 20, please go to Question 22.									
Ĺ										
Ca	Yes (see below) No and there is no transport available									
If y	es, how do you get to the required location/s?									
Pul	olic transport (trains, bus, taxi, ferry etc) Yes No									
Ow	n transport Yes No No									
Oth	ner transport (eg family/ friends) Yes No If yes, please specify what type									
lf y	ou are applying to live on an Indigenous community <u>only</u> , please go to Question 23.									
	at have you done to find alternative housing for your household?									
No	te - please tick all attempts you have made.									
L	Looked for private rentals through a real estate agent, listings in the paper or the internet									
L	Asked for assistance from other community agencies to find alternative housing									
L	Tried to rent a room or room/s in a shared household									
	Looked for housing in caravan parks, mobile home parks or cabins									
	Tried to gain housing on a long term basis with family and/or friends									
	None of the above									
fol No you	he household having difficulty obtaining or sustaining a tenancy in the private rental market due to any of the lowing reasons? te - please tick all reasons which apply to your household. Note - if you do not tick any of the reasons below, are declaring that you and your household are not having difficulty obtaining or sustaining housing in the private rket for any of these reasons.									
C	Please attach evidence stating the nature of the disability or medical condition and detailing the difficulties the household or household member has had obtaining or sustaining a tenancy in the private market. The department's 'Housing Assistance Referral Form' can be completed by a support agency, referring agency or social worker etc and attached to your application. The form is available from your nearest Housing Service Centre.									
	Due to a household member having an intellectual disability									
	Due to a household member having an physical disability									
	Due to a household member having a medical condition									
	Due to a household member being frail/aged									
Γ	Due to a household member having a mental illness									

2 4	Is the household having difficulty obtaining housing in the private market because of any of the following reasons?								
	not tic	- please tick all reasons which apply to your houck any of the reasons below, you are declaring that ying in the private market for any of these reasons.							
		Lack of housing available with suitable modifications fo	r your househo	old's needs					
		Lack of housing available which is affordable for your h	ousehold						
		Lack of housing available with enough bedrooms for yo	our household						
		Lack of properties to rent							
	Lack of properties with the critical features (e.g. secure fencing for children with disabilities, ground floor access or with no stairs etc)								
		The household does not have any previous rental history	ry or referees						
		A household member has a poor tenancy history either	with the depa	rtment or in the private market (e.g. listed on TICA)					
		The private rental applications you lodged were unsuccepersonal appearance/characteristics)	essful due to t	he personal attributes of the applicant (e.g.					
		The household has no money to purchase essential ho	usehold items	(e.g. a fridge)					
		The household has no money to move							
		The household has no personal transport and cannot a	ccess public tr	ansport					
		You have been unable to find suitable housing due to y	our household	's structure (eg due to the size of your household)					
25	Have	you had three or more tenancies in the last three yea	ars?	Yes No No					
	If yes,	, were you evicted, or was the tenancy terminated, in ns?	two of the las	st three tenancies for any of the following					
	Note -	- please tick all of the reasons which best descri	be why the te	nancies ended.					
		You owed rent arrears due to unaffordable rent							
		One or more of the tenancies was short term only (ie a vacate at the end of each tenancy	tenancy less t	han 12 months long) and you were asked to					
		You or a household member has impaired capacity due property damage occurring and/or your failure to keep tenancy agreement							
		Objectionable behaviour - you or a household member and this contributed to the objectionable behaviour occ		capacity due to a medical condition or disability					
26	If you	are applying to live on an Indigenous community or	ıly, please go	to Question 27.					
	Where	e do you want to live?							
	in Q20	nust list six areas/ suburbs in Queensland where we have 0 and Q21, please only list this location. For more Inform st Housing Service Centre.							
	Choic	e 1	Choice 4						
	Choic	e 2	Choice 5						
			\neg						
	Choic	e 3	Choice 6						

Please note: the requirement to list for six areas does not apply in rural or remote areas, however, you should list for as many suburbs/areas or towns as possible within a reasonable distance from the area you are applying for.

You must be willing to live in housing that first becomes available from any of the areas/ suburbs you list for.

	, live on a diagr	ata Indiaanaya sammunity and are only anniying to liv	on the same community in
		ete Indigenous community and are only applying to liv nity housing - which Indigenous community do you wa	
What types of	housing do you	u want to apply for?	
You will be ad	vised of the type	e of housing you are entitled to / eligible for.	
		ffer you the type of housing that you have requested and a with more than 4 bedrooms is limited.	re eligible for, however this cannot
Do you requir	re low-set hous	sing? Yes No	
You may tick	✓ more than	one type of housing you want to apply for.	
		have three or more units next to each other with one to fou These can be either single or double-storey and usually ha	
		at/ unit - is usually in a complex of two or more storeys wind ot have a separate yard.	th one to three bedrooms
	Detached hou	ises - one house with two or more bedrooms on its own bl	lock of land.
		ually two units with one to three bedrooms, each on a These may be in groups of two to four.	a block of land, divided by a
		ng - is a number of separate homes with two to four ag development.	bedrooms each, located
		are only available to applicants over 55 years of age and a ith one to two bedrooms each.	are usually in a complex of one
	on two storeys wi	in the to two beardons each.	
-	_	h shared facilities?	Yes No No
		ed living, bathroom and / or kitchen facilities. Note - if you use to remain on the Housing Register for an offer of self co	
Do you or any	person to be ho	oused with you, currently have a pet /s?	Yes No
Do you, or an	y person to be	housed with you, plan to have a pet /s?	Yes No
If ves. please	provide details		
	<u>'</u>		
lo there env fi	urthar infarmati	ion which you feel is relevent to your application?	
6		ion which you feel is relevant to your application?	
6		ion which you feel is relevant to your application? on a separate page if there is not enough space.	
6			
1			

invalid.

Signature

Declaration - you must complete and sign this application form in accordance with the requirements set out below.

I understand:

- the instructions given on this form and note the Privacy Notice below,
- this form will be used by the Department of Housing and Public Works to register my application for social housing, provided I am eligible for it,
- that my personal information may be given to non-government agencies to provide me with housing and/ or support services.
- that I may become ineligible for housing assistance if changes occur to any of my, or members of my household's circumstances, and/or incomes and/or assets detailed in this application.

I understand:

that I have to offer at least one item from both the primary and secondary list of items below as proof of my identity (one must show a Queensland address, applicant's signature and date of birth): Primary Secondary Full birth certificate or extract of birth certificate Bank, credit card or ATM card with your signature **Passport** Recent bank statements, bank book, credit union or building society statement showing recent transactions Driver's licence with photograph Apprenticeship indenture papers 18 plus card with photograph Other recognised photographic I.D. Queensland shooter's licence with photograph (e.g. security identification, Cash Converters Card) Immigration papers or other documents issued Original Australian marriage certificate or divorce papers by the Commonwealth Department of Immigration, Multicultural and Indigenous Affairs Life insurance policies Naturalisation or citizenship certificate Occupational registration documents **Taxation Assessment Notice** Pensioner Health Benefit Card or Centrelink's Customer Reference Number (CRN) on their official document or correspondence Medicare Card Student Card with photograph **Personal Information Privacy Notice** The Department of Housing and Public Works is collecting personal information on this form to provide you with housing assistance or assess grant funding applications. This is authorised by the Housing Act 2003. To assist you with your housing needs and services, relevant personal information may, in very limited and specific circumstances, be disclosed to: partner agencies, service providers, agencies authorised by legislative provisions, and local governments and non-governmental agencies that now, or will provide you with housing and/or support services. Limited personal information may be used for housing related research, policy or planning functions. Unless authorised or required by law, your personal information will not be passed on to any other third party without your consent. More information about the department's privacy policy is available on our website at www.hpw.qld.gov.au. **Declaration** To the best of my knowledge, the information provided on and in conjunction with this form is true and correct. I understand that I will commit an offence and be liable to a penalty under the Housing Act 2003 if I knowingly provide to the Department of Housing and Public Works false or misleading information that may influence decisions about my eligibility for housing services and may make my application Name of applicant/s Date Signed by the applicant/s Date Full name of witness Position

The witness must be either a Justice of the Peace/Commissioner for Declarations or a Solicitor or an officer of the Department of Housing and Public Works or an executive officer of a registered community housing provider or an officer of a Queensland Government Service Centre. The witness must also sight two of the identification items for each applicant.

Date

Declaration for people completing this form on behalf of the applicant

This form has been filled out with the information the applicant/s supplied to me. I have drawn the applicant's attention to the contents of this form, including item 32, and I believe the applicant understands the contents.

Name	Signed	Date	/	/
Name	Signed	Date	/	/

Evidence for your application



Please attach all supporting documents here if requested in this application.

Note - you will need to provide this evidence before your application can be completely assessed.

- For example:
- Formal Guardian and/or Administration Details (question 2)
- Informal Guardian and/or Administration Details (question 2)
- Additional details from question 8 (if required)
- Evidence of your citizenship or residency status (question 10)
- Evidence of you and your household's income and property ownership (question 11)
- Evidence of you and your household's assets (question 12)
- Evidence if any household member is expecting a child (letter from their doctor)
- Evidence to support question 14
- Evidence of your current housing situation (question 15)
- Evidence of rent being paid by any household members not living with you (question 17)
- Evidence of rent being paid by any household members who are living with you=(question 18)
- Evidence to support question 19 e.g. a copy of a Warrant of Possession or Domestic Violence Protection Order or Medical / Disability Information Form detailing the household member's difficulties with remaining in their current housing etc.
- Evidence of your household's need to be housed in a specific location (question 20)
- Medical / Disability Information Form detailing the household member's difficulties with obtaining or sustaining a tenancy in the private market (question 23)
- Additional details from question 23
- Additional details from question 30
- Additional details, if required, for questions 31