

APPLICATION FOR A RENTAL REBATE

OFFICE USE ONLY
Date received: /
Received by:
Tenancy No:
Expiry date prev rebate: /
Application Number:

Please use BLOCK LETTERS

You need to provide complete and accurate information. If you do not do so, the processing of your rental rebate details may be delayed. Inaccurate information can also result in legal action being taken to recover rebates to which you have not been entitled.

Current Address:	Rental Payment Method: (e.g. Cash, Centrelink, Bank Deduction)				
Rent Account Number:	Telephone Contact Numbers (Home/work/mobile):				
	(H)(W)	(M)			

Part A - Household Particulars

List the details of ALL persons living at your address

Full Name/s	Relationship to APPLICANT (e.g. Domestic Partner – Son – Daughter)	Date of Birth	Type of Income (e.g. Wages - Pension - Super)	Source of Income (e.g. Name of Employer – Super Fund – Centrelink)	Gross Fortnightly Income (Before tax)	Aboriginal or Torres Strait Islander descent*	Disability or special needs * (Use separate sheet if insufficient space)
EXAMPLE: John Henry Smith	Domestic Partner	12 / 03 / 62	Pension	Centrelink	\$286.95	No	Yes (No stairs)
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		
		/ /			\$		

^{*} This information is required for statistical purposes and to assist Housing ACT to review existing assistance programs and develop new programs that better target the community.

Please Note

This application will only be assessed when all questions are fully answered and evidence of income is received. An incorrect or incomplete application will cause delay in the assessment of your rebate. If you are unsure how to answer any question, please contact your Housing Manager. The complete application may be posted to Housing ACT or delivered to Housing ACT as below:

Postal Address Housing ACT Locked Bag 3000 BELCONNEN ACT 2616 Belconnen (Shopfront) Ground Floor, 153 Emu Bank BELCONNEN ACT 2617 DROP OFF BOX ONLY City City Health Centre 1 Moore Street Canberra City DROP OFF BOX ONLY
Tuggeranong
Access Canberra
Shop 17-21 Homeworld Shopping Centre
Reed Street, Tuggeranong

If people have moved into or left the property, the Tenant(s) must provide a Statutory Declaration advising of the date the person(s) entered or departed. If you are paying child support, please provide a Payment Assessment from Child Support Agency or other evidence. These payments are exempt from assessment for Rebate purposes.

Part B – Other Income Sources					
Has anyone in the household received any interest from savings banks, fixed deposits, credit unions, building societies or dividends from any investments in the past year?					
☐ Yes ☐ No					
If YES, show details here. The amount	of money received must be show	n, not	the amount on deposit or invested.		
Name	Annual Amount \$		Name	Annual Amount \$	
5					
	Current Balance of Savings \$ Current Balance of Investments \$				
anybody intending to claim?	Does anyone in the household currently have an outstanding claim for workers or other form of compensation, or is anybody intending to claim?				
Yes No					
Note: If YES, applicants must complete	an Undertaking To Repay Rental	Rebat	e when any payment is received.		
Is anyone in the household anticipating party insurance or other source?	ց, or has received, any lump sum բ	payme	nt (in the past 12 months) from third		
Yes No					
If YES , provide information and attach	appropriate documentation				
	Important Inf	forma	ation For Applicants		
What is Gross Income? Gro			ensions and allowances (including oversea on, compensation, family payments and		
-	Proof Of Income Each person receiving any income must provide proof of that income before a rental rebate will be assessed. This can be any of the following:				
 Employer's statement showing current gross and previous 26 weeks income Statement showing interest/dividends (e.g. bank, credit union, dividend statement) Department of Veterans' Affairs statement Centrelink statement (Centrelink clients can authorise Housing ACT to obtain the information directly by completing an authority form) If you are self-employed: please refer to the Fact Sheet for Proof of Income for Self-employed Persons which is available on the Disability, Housing and Community Services website or from the Applicant Services Centre. 					
		Decia	ration		
 Apply for a rebate of rent. Declare that the contents of this application are true and correct in every detail, and acknowledge that the provision of false information may lead to prosecution and recovery of any rebate granted. Undertake to notify Housing ACT immediately of any change to the household particulars shown so the rebate (if granted) may be varied, and acknowledge that the failure to notify Housing ACT will result in the recovery by the Commissioner for Social Housing of any overpaid rebate granted. Acknowledge that: a) the rent rebate is for a period of six months or such other period as the Housing Commissioner may determine; b) at the end of the rent rebate period, I/we must submit a new Application for Rental Rebate form if I/we believe I/we have an on going entitlement to a rebate; and c) failure to submit this form or provide further information requested by the Housing Commissioner may result in the immediate withdrawal of the rent rebate by the Housing Commissioner. 					
Privacy					
The personal information on this applic The information you provide will be tre where required or authorised by or una	ated confidentially and used to as ler law.	ssess yo	stance Act 2007. our entitlement to rental rebate, for statist till accurate, and to allow you to correct it		

Signature

.....

..... / /

Signature

.....

..... / /

INCOME CONFIRMATION AUTHORITY

I / We hereby authorise Services Australia to provide to Housing ACT a Centrelink Statement of Income in connection with my / our Application for Rental Rebate.

I / We understand that the Statement will contain:

- The type and amount of the pension or allowance payment Centrelink make to me / us.
- The number of dependent children used to assess any family payments.
- Details of anything being deducted from my / our payments, such as CSA payments, Centrepay deductions, Rent deductions.
- Details of any other income I / we have told Services Australia about, such as overseas pensions, child maintenance, returns on investment, wages/salary.

These details will be used by Housing ACT to assess my / our entitlement to a Rental Rebate.

I / We consent to Services Australia providing this Statement electronically via the Income Confirmation service. This consent is limited to providing information only in respect of this Application for Rental Rebate.

I / We understand that I / we will be able to obtain a written copy of the Statement at any time from either Housing ACT or Services Australia.

Applicant 1	Applicant 2
Full Name	Full Name
Centrelink CRN	Centrelink CRN
Signature	Signature
Data / /	Pata / /
Date/	Date/
Applicant 3	Applicant 4
ADDIICANI 3	
	Applicant 4
Full Name	Full Name
Full Name	Full Name
Full Name	Full Name
Full Name	Full Name
Full Name Centrelink CRN	Full Name Centrelink CRN
Full Name	Full Name
Full Name Centrelink CRN	Full Name Centrelink CRN
Full Name Centrelink CRN	Full Name Centrelink CRN

Statement by Employer of Employee Income

This	confirms that Mr / Mrs / Ms			
of				
has b	een employed by		. for weeks in the past 26 v	veeks.
Durir	ng those weeks his/her gross e	arnings were \$		
His/H	Her present gross weekly wage	consists of:		
•	Base Wage	\$		
•	Overtime	\$		
•	Allowances/Commission	\$		
Tota	I	\$		
	he commenced with the compensement provided by		 I to whom Housing ACT may direct enquiries reg	garding its content
	Signature 	//	Position held (e.g. Manager, Treasurer)	Telephone contact No.
	s Full Name)	D.O.B	//	
Addre	ess			
with	permission to Housing ACT for the my Application for a Rental Rebate ture	e with the Company/Fi	rm or person nominated above.	Please place company stamp or seal here