

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 Communities (Housing and Homelessness Services) 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.communities.qld.gov.au/housing

# 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.

What is your first language spoken at home?         Do you require an interpreter for an interview?         f you would like to talk about your application in a language other than Engarrange a signing interpreter for people with hearing difficulties. Please tick services.         anguage interpreter       Signing interpreter         anguage       Signing interpreter	Yes No
f you would like to talk about your application in a language other than Eng arrange a signing interpreter for people with hearing difficulties. Please tick services. .anguage interpreterSigning interpreter	
arrange a signing interpreter for people with hearing difficulties. Please tick services.	lish, we can arrange for an interpreter to assist you. We can also
anguage	
English Farsi	Persian)
	جنانچه بر ای تکمیل نمودن این فرم به یک مترجم احتیاج دارید، لطفاً با نزدیکترین مرکز خدمات مسکن تماس حاصل نما
	n otrzebujesz pomocy tłumacza ustnego dla wypełnienia tego formularza, prosimy
إذا كنتم بحاجة إلى مترجم شفوي لمساعدتك في ملئ هذه الاستمارة، الرجاء الاتصال بأقرب مركز للغدمات الإسكانية في منطقتك.	ktować się z Biurem Obsługi w Spawach Mieszkaniowych (Housing Service Centre).
Bosnian Russi	
	Вам необходим переводчик при заполнении данной формы, просим Вас цаться в ближайший Центр жилищных услуг.
Chinese Samo	an
faamo	te mana'omia se faamatalaupu e fesoasoani ia te oe i le faatumuina o le pepa lenei, lemole faafesootai le ofisa Autu o Auaunaga mo Fale (Housing Service Centre) pito ne i lo outou pitonuu
Croatian	
Ako vam je pri popunjavanju ovog obrasca potrebna pomoć tumača, molimo obratite se mjesnom Centru službe za stambena pitanja (Housing Service Centre).	
	ко вам је потребна помоћ преводиоца како бисте испунили овај формулар, ко контактирајте локалну Службу за стамбене послове (Housing Service Centre).
Dari اگر به منظور خانه بری کردن این فور م به یک تر جمان ضرور ت دارید، لطفاً با نزدیکترین مرکز خدمات مسکن تماس بگیرید	
	sh esita un intérprete para poder completar este formulario, por favor póngase en
	to con el Centro de Servicio de Vivienda (Housing Service Centre) de su zona.
បើអ្នកត្រូវការអ្នកបកប្រៃដើម្បីជួយបំពេញទម្រង់បែបបទនេះ ស្វមទាក់ទង Housing Service Centre (មជ្ឈមណ្ឌលផ្តល់សេវាទីលំនៅ) ដែលជិតអ្នកបំផុត។	og(Filipino)
	kailangan mo ng isang interpreter upang makumpleto ang pormang ito, makipag-alam ng pinakamalapit na Sentro para sa Mga Serbisyo sa Pabahay (Housing Service »).
ຖ້າຫ່ານຕ້ອງການນາຍແປພາສາເພື່ອຊ່ວຍປະກອບເອກະສານສະບັບນີ້, ກະລຸນາຕິດຕໍ່ໄດ້ທີ່ຫ້ອງການບໍລິການໃກ້ ບ້ານຫ່ານ.	Imese
Nếu q	uý vị cần thông dịch viên để giúp điền đơn này, xin liên lạc với trung tâm Dịch Vụ Gia ousing Service Centre) gần nhất.

What type of social housing do you want to apply for? (Please tick  $\checkmark$  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 only, 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 when making decisions?

Is there a person who assists you to make decisions, or who makes decisions on your behalf in regard to personal, lifestyle, or financial matters? This person might be a formally appointed guardian and/or an administrator or a family member, friend or advocate.

/oc	No	
163	110	

If yes, please complete and attach one of these forms which are available from your nearest Housing Service Centre or from the department's website **www.communities.qld.gov.au/housing:** 

- Formal Guardian and/or Administrator Details if you have a Guardian and/or Administrator who was formally appointed by the Queensland Civil and Administrative Tribunal (QCAT) or the former Guardianship and Administration Tribunal (GAAT), or
- Informal Decision-maker Details if you have a family member, friend or advocate acting in the capacity of an informal guardian and/or administrator and who helps you make decisions.

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What is your current add				
			Pos	stcode
What is your mailing add	Iress?			
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			Pos	stcode
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Telephone	Private		Business	
	Mobile			partment may also send y SMS (text messages).
	Email			
<b></b>				
Please indicate the way y				
(e.g. telephone, letter, SMS,	, email. Note - you can list n	iore than one way).		
You must advise us of an	v chanae to this address	. If we cannot contact w	ou, your application may b	e cancelled.
	,	.,,		
DI 11 (1	e			
		rganisation with a diffe	erent address to you, whon	the department could c
Please provide the name if unable to contact you o		rganisation with a diffe	erent address to you, whom	the department could c
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if unable to contact you of         Person/organisation         Address         Address         Telephone         Are you, or any person to         (Housing and Homelesson)         If yes, name of person	directly. Private/Mobile	rrently living in a Depa	Pos	tcode
if unable to contact you of Person/organisation	directly. Private/Mobile	rrently living in a Depa	Pos	tcode
if unable to contact you of         Person/organisation         Address         Address         Image: Contact you of the second seco	directly. Private/Mobile Private/Mobile be housed with you, cu ness Services) rental prop	rrently living in a Depa	Pos	tcode

6	Are you, or any person to be housed w	vith you, currently living in community-managed housing? Yes	No
	If yes, name of person		
	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 w	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)		
0	Have you, or any person to be housed         Public rental housing         Aboriginal and Torres Strait Islander housing         Bond loan assistance         Housing loan assistance         Community-managed housing         Indigenous community housing         Indigenous Council community housing         If 'yes', name of person/s         Address of property	Yes     No     Yes     No       Yes     No     Yes     No       Yes     No     Yes     No       Yes     No     Yes     No	
	Date vacated property Name of community or local government (including Indigenous Cou housing provider	Account number (if known)	
	If there is not enough space, pla	lease provide similar details for each person on a separate page and attach to thi	s application.
9	Have you, or any person to be housed	l with you, been known by another name/s in the past?	
	(e.g. name changed by deed poll, man	riage or divorce) Yes	No
	If yes, please list the name of each per	rson 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 outcomes for Indigenous people. The following information is collected for reporting and planning purposes and/or to determine your eligibility for housing assistance.

For each household member please tick  $\checkmark$  which of the following apply

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 Australia? (please tick 🖌 the option that applies for each person's residency 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				
Have 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, Australian Passport, 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. 10

# 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 outcomes for Indigenous people. The following information is collected for reporting and planning purposes and/or to determine your eligibility for housing assistance.

For each household member please tick 🖌 which of the following apply

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 Australia? (please tick 🖌 the option that applies for each person's residency 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					
Have 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, Australian Passport, Australian Citizenship certificate, 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

# **11** 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.communities.qld.gov.au/housing.** 

Household member	No.1	No.2	No.3	No.4
Surname				
First name/s				
Income	\$	\$	\$	\$
<b>Income type</b> (wages, pension, allowance, family payments)				
<b>Other income</b> (for example, maintenance, superannuation, etc.)				

Do you, or any household member, own or part own property either in Australia or overseas?

Please tick 🖌 all options that app own that type of property.	oly. Note - for any option t	hat you do not tick, you a	are declaring that you and	l your household do not
<b>Residential</b> (including a house, flat, unit, townhouse or manufactured home)				
<b>Vacant land of any type</b> (including residential, commercial or industrial, etc.)				
Live-aboard boat, caravan, mobile home, donga or cabin				
Industrial property				
Commercial property				
A				

If yes to any of the above, complete the information below and attach supporting documentation.

Name of person who owns or part own	s the property		
Address of property			
		Р	ostcode
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 ownership			

# **11** Household income and asset information continued

Use this page for additional household members if required.

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

Household member	No.5	No.6	No.7	No.8
Surname				
First name/s				
Income	\$	\$	\$	\$
<b>Income type</b> (wages, pension, allowance, family payments)				
<b>Other income</b> (for example, maintenance, superannuation, etc.)				

# Do you, or any household member, own or part own property either in Australia or overseas?

Please tick 🖌 all options that apply. Note - for any option that you do not tick, you are declaring that you and your household do not own that type of property.

<b>Residential</b> (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, complete the information below and attach supporting documentation.							
lame of person who owns or part owns the property							

Address of property							
				Р	Postcode		
Amount of property owned	d e.g. 50%						
Current value of the prope	rty	\$		Date of ownership	/	/	
Is the property mortgaged	!?	Yes No	lf yes, amour	nt of mortgage owing	\$		
Details of the property ow	nership						

# **12** Household income and asset information continued

If you, or any household member, has **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.

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)	\$	\$	\$	\$
<b>Deposits</b> (including interest free bearing deposits, fixed deposits etc)	\$	\$	\$	\$
Bonds	\$	\$	\$	\$
Debentures	\$	\$	\$	\$
<b>Shares</b> (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	\$	\$	\$	\$

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

12 Household income and asset information continued - use this page for additional household members if required

If you, or any household member, has **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.

*P* Please attach evidence of all assets owned by each person on 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)	\$	\$	\$	\$
<b>Deposits</b> (including interest free bearing deposits, fixed deposits etc)	\$	\$	5	\$
Bonds	\$	\$	\$	\$
Debentures	\$	\$	\$	\$
<b>Shares</b> (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)	\$	\$	\$	\$
<b>Superannuation</b> - lump sum payment/s (if you were born before 1 July 1960)	\$	\$	\$	\$
Proceeds from a property sale	\$	\$	\$	\$
Share of a property settlement	\$	\$	\$	\$

13	Are any of the household members on the application expecti	ing a child? Yes No
I	If yes, name of the person/s	
I	Expected date of delivery (due date)	<b>Note</b> – a letter from their doctor is required.
_ i	<ul> <li>Are you applying for housing assistance on any of the following Note - please tick all grounds which apply to your house declaring that you and your household are not applying for household</li> <li>Referral from Department of Communities (Disability Services) or a non-government support provider – Housing with Shared Support (HwSS) program to be a member of a new household</li> </ul>	hold. Note - if you do not tick any of the grounds below, you are pusing for any of these reasons.         You are in contact with the Department of
[	You have a disability and/or mental illness <b>and</b> 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 provider confirming eligibility for special disability services to establish independent living Referral from the Department of Communities (Child Safety Services) as the safety of a child in your care is at risk	<ul> <li>You are a young person who is exiting the care of the State <b>and</b> transition planning is underway</li> <li>Referral from a support provider as receiving assistance under the Street to Home initiative</li> <li>None of the above</li> </ul>
15	Which of the following best describes your current housing sig	tuation?
I	Note - you can tick 🖌 more than one if the people listed on	your application are not currently living together.
[	<ul> <li>Public housing or Aboriginal and Torres Strait Islander housing</li> <li>Community Housing - including long term community housing, affordable housing and longer term</li> </ul>	<ul> <li>Boarding privately</li> <li>Private boarding house</li> <li>Private hostel</li> </ul>
[	Community Managed Studio Units Temporary and Supported accommodation - including refuges, shelters or emergency, crisis and other housing delivered by specialist homelessness services to people who are homeless or at risk of homelessness	Caravan park
[	Community Housing - transitional (including Community Rent Scheme, Same House Different Landlord and transitional Community Managed Studio Units program)	<ul> <li>Hotel/motel</li> <li>Living on the street or sleeping in the park</li> <li>Living or squatting in a derelict, makeshift or illegal building</li> </ul>
[	Medical institution/facility or hospital and have no other housing to go to	Living with family or friends
[	Correctional facility	Living on a boat
[	Own home	Living in Indigenous council housing
[	Renting privately (including sharing a house/flat)	

16	How many people live in your current housing? Please tick 🖌 the applicable	box.
	0 1 2 3 4 5 6 7	If more than 7, please state how many people live in your current housing.
	How many bedrooms does your current housing have? Please tick $\checkmark$ the app	licable box.
	0 1 2 3 4 5 6 7	If more than 7, please state how many bedrooms are in your current housing.
	Please complete the following question if you are only applying to live on one of are not only applying to live on the same Indigenous community that you are all	
	How many different family groups, or different household groups, live in your cu	urrent housing?
17	Is everybody listed on this application currently living with you?	Yes No

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 not currently living with you	Weekly rent/board		Weekly Rent Assistance received	
		\$	.00	\$	.00
		\$	.00	\$	.00
		\$	.00	\$	.00
		\$	.00	\$	.00
	Total	\$	.00	\$	.00

**18** 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).

	kly rent/ oard	ekly Rent Ince received		<ly <br="" rent="">oard</ly>	ekly Rent nce 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

	ny of the people listed on your application having difficul wing reasons?	ties rem	aining in their current housing for any of the
	- please tick 🖌 all situations that apply to your househouring that you and your household do not have these difficu		e - if you do not tick any of the reasons below, you are th remaining in your current housing.
	The boarding house has closed or is about to close		A household member's medical condition and/or
	The hostel has closed or is about to close		disability is seriously aggravated by the current housing which cannot be readily modified to suit their needs
	The caravan park has closed or is about to close		The features of the current housing restrict household
	Household is facing immediate eviction and has no other housing options		members from doing daily living activities (e.g. bathing, mobility)
	You need to leave your current housing due to a domestic violence situation		The current housing is overcrowded causing serious long term safety risks
	You need to leave your current housing due to a risk of violence from another household member, neighbour		The current housing lacks essential facilities (e.g. cooking, bathroom, water supply, heating, lighting etc)
	or community member		The current housing's structural condition could lead to
	There has been an irreversible family breakdown resulting in the person being asked to live elsewhere		serious health and safety risks
	(not domestic violence situation)		You are living in housing with shared facilities which no longer meets your needs (e.g. private boarding
	You are living with family and friends on a temporary basis and are at risk of homelessness		house, hostel, caravan park, hotel, motel or communit managed social housing) and you want to apply for sel contained housing
	The family unit needs to reunite as they are currently living apart		None of the above
Ø	aring that you and your household do not need housing in Please attach evidence supporting the reason the appli to your nearest Housing Service Centre about the types of e	ant or h	ousehold member requires access to a specific location.
	To gain or maintain regular access to a child or children in		
	To enable a child or children to be returned to the custod		
	To gain or maintain regular access to a child or children w	ho are ir	n the custody or care of another person
	To prevent a child or children being removed from the cu	stody of a	a household member
	To enable the shared care of a child or children		
	To ensure access to a specialist educational facility		
	To ensure access to a frequently needed medical facility	or medic	al services required by a household member
	To ensure access to support services required by a house	hold me	mber for daily living activities
	To ensure access to accessible transport services		
	To receive family or informal support on a regular basis th	at is neo	essary for daily living
	To take up a firm offer of permanent employment (not cas	sual or te	mporary employment or a promotion)
	To relocate under the Structured Training and Employmer (CDEP) or other Commonwealth Government employmen		
	You are an Aboriginal and/or Torres Strait Islander persor	needin	g to move for cultural reasons
	You are an Aboriginal and/or Torres Strait Islander persor need to move to another house on the same Indigenous		

13

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

	u did tick any of the reasons in Question 20, what are the required location/s you need access to?							
Can	vou get to this location?       Yes (see below)         No and there is no transport available							
If yes, how do you get to the required location/s?								
Publ	c transport (trains, bus, taxi, ferry etc) Yes No							
Own	transport Yes No							
	Other transport (e.g. family/friends) Yes No If yes, please specify what type							
lf yo	are applying to live on an Indigenous community <u>only</u> , please go to Question 23.							
Wha	have you done to find alternative housing for your household?							
Note	- please tick 🖌 all attempts you have made.							
Looked for private rentals through a real estate agent, listings in the paper or the internet								
	Asked for assistance from other community agencies to find alternative housing							
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							

Is the household having difficulty obtaining or sustaining a tenancy in the private rental market due to any of the following reasons?

Note – please tick  $\checkmark$  all reasons which apply to your household. Note - if you do not tick any of the reasons below, you are declaring that you and your household are not having difficulty obtaining or sustaining housing in the private market for any of these reasons.

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	house	ehol	d men	ıber	' hav	ing ar	inte	llec	tual	disa	ability	/

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

Due to a household member having a mental illness

24	Is the household having difficulty obtaining housing in the private market because of any of the following reasons?							
	of the	$e$ - please tick $\checkmark$ all reasons which apply to your household be reasons below, you are declaring that you and your household ket for any of these reasons.		s to find suitable housing. Note - if you do not tick any having difficulty obtaining housing in the private				
		Lack of housing available with suitable modifications for yo	ur househo	old's needs				
		Lack of housing available which is affordable for your house	hold					
		Lack of housing available with enough bedrooms for your he	ousehold					
		Lack of properties to rent						
		Lack of properties with critical features (e.g. secure fencing stairs etc)	for childrer	n with disabilities, ground floor access or with no				
		The household does not have any previous rental history or	referees					
		A household member has a poor tenancy history either with	the depar	tment or in the private market (e.g. listed on TICA)				
		The private rental applications you lodged were unsuccessf appearance/characteristics)	ul due to th	ne personal attributes of the applicant (e.g. personal				
		The household has no money to purchase essential househ	old items (	(e.g. a fridge)				
		The household has no money to move						
		The household has no personal transport and cannot acces	s public tra	ansport				
		You have been unable to find suitable housing due to your l	nousehold'	's structure (e.g. due to the size of your household)				
25	Have	e you had three or more tenancies in the last three years?		Yes No				
	lf yes	s, were you evicted, or was the tenancy terminated, in two of t	he last thr	ree tenancies for any of the following reasons?				
	Note	- please tick $\checkmark$ all of the reasons which best describe why	the tenanc	cies ended.				
		You owed rent arrears due to unaffordable rent						
		One or more of the tenancies was short term only (ie a tena the end of each tenancy	ncy less tha	an 12 months long) and you were asked to vacate at				
		You or a household member has impaired capacity due to a	medical co	ondition or disability and this contributed to				
		property damage occurring and/or your failure to keep the p agreement	property cle	ean and tidy as required by the terms of your tenancy				
		Objectionable behaviour - you or a household member has	impaired c	apacity due to a medical condition or disability and				
		this contributed to the objectionable behaviour occurring						
26	lf you	u are applying to live on an Indigenous community <u>only</u> , plea:	se go to Qu	uestion 27				
	Wher	ere do you want to live?						
	in Q2	must list six areas/suburbs in Queensland where we have pro 20 and Q21, please only list this location. For more informatio rest Housing Service Centre.						
	Choid	ice 1	Choice 4					

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.

Choice 6

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

Choice 3

27			
<i>∠  </i>	If you are not applying to live on an Indigenous community only, please go to Question 28.		<b>c</b> "
	If you already live on a discrete Indigenous community and are only applying to live on the same com community housing - which Indigenous community do you want to remain on?	munity in Indigenc	ous Council
20			
28	What types of housing do you want to apply for?		
	You will be advised of the type of housing you are entitled to/eligible for.		
	We will make every effort to offer you the type of housing that you have requested and are eligible for, guaranteed. Note - housing with more than four bedrooms is limited.	however this can	not be
	Do you require low-set housing?	Yes	No
	You may tick 🖌 more than one type of housing that you want to apply for.		
	<b>Townhouses</b> - have three or more units next to each other with one to four bedrooms each, div These can be either single or double-storey and usually have small fenced yards.	ided by common v	valls.
	Apartment/ flat/ unit - is usually in a complex of two or more storeys with one to three bedrood have a separate yard.	ms each. They do r	not
	<b>Detached houses</b> - one house with two or more bedrooms on its own block of land.		
	Duplexes - usually two units with one to three bedrooms, each on a block of land, divided by a be in groups of two to four.	common wall. The	ese may
	<b>Cluster housing</b> - is a number of separate homes with two to four bedrooms each, located with development.	in a housing	
	Seniors units are only available to applicants over 55 years of age and are usually in a complex with one to two bedrooms each.	x of one or two sto	reys
20	Will you accent benefice with showed facilities?	Yes	No
<i>L /</i>	Will you accept housing with shared facilities?		
	Some housing may have shared living, bathroom and / or kitchen facilities. <b>Note</b> - if you accept an off shared facilities, you can choose to remain on the housing register for an offer of self-contained housing the shared facilities.		11 11 11 11 11 11 11 11 11 11 11 11 11
30	Do you or any person to be housed with you, currently have a pet/s?	Yes	No
	Do you, or any person to be housed with you, plan to have a pet/s?	Yes	No
	If yes, please provide details		
31	Is there any further information which you feel is relevant to your application?		
	Please provide details on a separate page if there is not enough space.		
			]

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

## I understand:

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- the instructions given on this form and note the Privacy Notice below,
- this form will be used by the Department of Communities (Housing and Homelessness Services) to register my application for housing assistance, 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):

Prima	ry	Secon	dary
	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
	Driver's licence with photograph		or building society statement showing recent transactions
	18 plus card with photograph		Apprenticeship indenture papers
	Queensland shooter's licence with photograph		Other recognised photographic I.D.
	Immigration papers or other documents issued by		(e.g. security identification, Cash Converters Card)
	the Commonwealth Department of Immigration, Multicultural and Indigenous Affairs		Original Australian marriage certificate or divorce papers
	Naturalisation or citizenship certificate		Life insurance policies
			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 Communities 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.communities.qld.gov.au/privacy

### 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 Communities false or misleading information that may influence decisions about my eligibility for housing services and may make my application invalid.

Name of applicant/s			Date	/	/
Signed by the applicant	/s		Date	/	/
Full name of witness		Position			
Signature			Date	/	/

The witness must be either a Justice of the Peace/Commissioner for Declarations or a Solicitor or an officer of the Department of Communities (Housing and Homelessness Services) 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.

# 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:

Ø

- Formal Guardian and/or Administrator Details (question 2)
- Informal Decision Maker 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 members 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 members 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 question 31