

APPLICATION FOR AN ADDITIONAL HOUSEHOLD MEMBER

Privacy Notice

Tharawal Housing Aboriginal Corporation values the right and privacy of all clients. Tharawal Housing Aboriginal Corporation will not share your personal information unless required to by law or consent has been given. The information collected from you or a third party will be held by Tharawal Housing Aboriginal Corporation. Tharawal Housing Aboriginal Corporation complies with NSW privacy legislation when

Tenant Details	C	lient Number		1					
]					
Title - Mr, Mrs, Ms, M	ss								
Last name or family nar	ne								
Given nam	e/s								
Unit/House numb	er								
Street /Aver	iue								
Town or Sub	urb					Postcode			
Pho	ne			Mob	ile				
Em	nail								
Name/s of additional person/s applying		Title	Given name/s			Last	Last name or family name		
to be added to your household	1								
	2								
	3								
	4								
Notice and Declarations Notice and Declarations Under the Housing A statement or representation. Anyone who wilfu benefit of any kind may be refused further assi	lly makes	s any false stateme	ents that res	ult in ther	n obta				

Your personal information and any relevant health information provided on this form will be exchanged between social housing providers (public, community and Aboriginal housing) for the purpose of assessing your continuing eligibility for social housing and providing an appropriate service.

Tenant's Declaration

- · I understand and acknowledge the instructions given on this application form.
- · I have attached an Additional Occupant Part B form for each new additional person.
- · I give my permission for the additional person(s) listed to be housed with me, if THAC approves the application.
- · I understand that this application does not in any way make the additional person(s) eligible for separate accommodation in their own right.
- · To the best of my knowledge the information provided in this application (Parts A and B) by the tenant and all additional person(s) is true and correct.
- · I understand there are penalties for giving false or misleading information.
- · I understand that I must notify THS within 28 days of any change in my household.

I authorise THAC to:

- · confirm information provided by me with any third party and or any such third party to provide THAC any relevant documentation or information sought by THS when determining or supporting this application.
- · use my personal information in order to process this application.

Tenant's name (print)	
Tenant's signature	X
Date	DD / MM / YYYY



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Additional F	Person's Information			
Attach proof of identity	Title - Mr, Mrs, Ms, Miss			
or identity	Last name or family name			
	Given name/s - First and Middle			
	Other name (if applicable)			
	CRN - Centrelink Reference Number			
	Date of birth			
	Relationship to the tenant			
	Date you moved in, or are moving in			
ı	Reason/s for moving into the property			
In what count	ry were you born?			
Are you of Aboriginal or Torres Strait Islander origin?		Yes	No	Give details <i>and attach</i> proof of Aboriginality
What is your current citizenship?		Australian Go to Q8 citizen	Other	Give details <i>and attach</i> proof of citizenship
What is your status/visa ca	current residency tegory?	Permanent resident		Sponsored migrant
Attach proof of residenency or visa category		New Zealand Special Category Visa		Refugee
		Asylum seeker		Temporary resident
What is your	visa subclass number?			
What is your	date of arrival in Australia?			
What is your	main language spoken at home?			
Do you need	an interpreter?	Yes ↓ what language	No	



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General Information							
Do you have a disability, medical condition or permanent injury ?	Yes		□ No		Give details <i>and attach</i> proof of disability of medical condition		
Do you receive ongoing support from an organisation, program or a person/individual?	Yes			No		d attach contact proof of support arrangement	
Do you have any location restrictions about where you can live?	☐ Yes			No			
Housing History							
What is the address of the property you are leaving or have left?				A++	ما میں دار دار است	-: d - 0 - 2 - 2 d du - 2 -	
				Attac	ch proof of this re	sidency address	
How long did you live at this address for?					Years Months		
Is this property a social housing property?	☐ Yes			No →		the Notice and	
If you are currently an additional occupant of another Agency's household, provide details of the tenant's name and address.	Name						
the tenant's name and addless.	Address Suburb				Postcode		
Have you asked to have your name removed from this household?	☐ Yes	☐ Not applicab	le	No →	(a Housi a lette	a written request ng Statement or er) requesting to uish the tenancy	



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Notice and Declarations

Notice and Declarations Under the Housing Act 2001 a fine of up to \$2,200 and/or three months imprisonment applies for making a false statement or representation. Anyone who wilfully makes any false statements that result in them obtaining accommodation or other financial benefit of any kind may be refused further assistance by social housing providers or prosecuted.

Notice: Your personal information and any relevant health information provided on this form will be exchanged between social housing providers (public, community and Aboriginal housing) for the purpose of assessing your continuing eligibility for social housing and providing an appropriate service.

Additional Person's Declaration

- I understand the instructions given on this application form.
- To the best of my knowledge, the information provided in this application form is correct.
- I understand there are penalties for giving false or misleading information.
- I understand that this application does not in any way make me eligible for separate accommodation in my own right.
- I authorise Tharawal Housing Aboriginal Corporation (THAC) to:
 confirm information provided by me with any third party and or any such third party to provide THAC any relevant
 documentation or information sought by THAC when determining or supporting this application.
- Use my personal information in order to process this application.

Confirmation sent to client

Tenant's file updated

If you are the applying to be the additional occupant and are aged 16 years or over, sign here, once you have read and understood the declaration statements. Full name (please print) Signature Date Contact Number **Declaration from Person Assisting You** Yes that person should No Is there another person helping you to fill out read and sign the this form? declaration below I filled in this form on the basis of the information the tenant gave me. I have read out the form and the answers to the tenant who seemed to understand them. I understand there are penalties for giving false or misleading information. Full name (please print) Signature Date Contact Number Office Use Only Staff initals A photocopy of each document attached No Yes Each photocopy signed and dated by the tenant Yes No

Yes

Yes

No

No