



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](http://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.

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 other than English, we can arrange for an interpreter to assist you. We can also arrange a signing interpreter for people with hearing difficulties. Please tick the box below if you would like us to arrange either of these services.

Language interpreter

Signing interpreter

Language

<p><b>Persian/فارسی</b></p> <p>چنانچه برای تکمیل نمودن این فرم به مترجم احتیاج دارید تا شما را با ری دهد، لطفاً با اداره مسکن محل تماس حاصل فرمایید.</p> <p><b>Polish/po polsku</b></p> <p>Osoby, które do wypełnienia tego formularza potrzebują pomocy tłumacza, proszone są o skontaktowanie się z najbliższym urzędem Ministerstwa Spraw Mieszkaniowych.</p> <p><b>Russian/Русский язык</b></p> <p>Если вы нуждаетесь в помощи переводчика при заполнении данной формы, обратитесь пожалуйста в местный Департамент по Обеспечению Жильём.</p> <p><b>Samoan/Samoan</b></p> <p>Afai e te manaomia se faamatalaupi e fesoasoani i a oe i le faatumuina o le pepa lenei, faamolemole faafesootai le ofisa o le Matagaluega o Fale pito lata ane i lo outou pitonuu.</p> <p><b>Serbian/Српски</b></p> <p>Уколико вам је потребна помоћ преводиоца како бисте испунили овај формулар, молимо контактирајте локалну канцеларију Одсека за стамбене послове.</p> <p><b>Spanish/Español</b></p> <p>Si necesita un intérprete para poder completar este formulario, póngase en contacto con la oficina del Department of Housing de su zona.</p> <p><b>Filipino/Tagalog</b></p> <p>Kung kailangan mo ng isang interprete upang matulungan kang kumpletohin ang pormang ito, makipag-alam sa iyong lokal na opisina ng Kagawaran ng Pabahay.</p> <p><b>Vietnamese/Tiếng Việt</b></p> <p>Nếu cần một thông ngôn viên để giúp quý vị điền đơn này, xin liên lạc với văn phòng Sở Gia Cư địa phương của quý vị.</p>	<p><b>Persian/فارسی</b></p> <p>چنانچه برای تکمیل نمودن این فرم به مترجم احتیاج دارید تا شما را با ری دهد، لطفاً با اداره مسکن محل تماس حاصل فرمایید.</p> <p><b>Polish/po polsku</b></p> <p>Osoby, które do wypełnienia tego formularza potrzebują pomocy tłumacza, proszone są o skontaktowanie się z najbliższym urzędem Ministerstwa Spraw Mieszkaniowych.</p> <p><b>Russian/Русский язык</b></p> <p>Если вы нуждаетесь в помощи переводчика при заполнении данной формы, обратитесь пожалуйста в местный Департамент по Обеспечению Жильём.</p> <p><b>Samoan/Samoan</b></p> <p>Afai e te manaomia se faamatalaupi e fesoasoani i a oe i le faatumuina o le pepa lenei, faamolemole faafesootai le ofisa o le Matagaluega o Fale pito lata ane i lo outou pitonuu.</p> <p><b>Serbian/Српски</b></p> <p>Уколико вам је потребна помоћ преводиоца како бисте испунили овај формулар, молимо контактирајте локалну канцеларију Одсека за стамбене послове.</p> <p><b>Spanish/Español</b></p> <p>Si necesita un intérprete para poder completar este formulario, póngase en contacto con la oficina del Department of Housing de su zona.</p> <p><b>Filipino/Tagalog</b></p> <p>Kung kailangan mo ng isang interprete upang matulungan kang kumpletohin ang pormang ito, makipag-alam sa iyong lokal na opisina ng Kagawaran ng Pabahay.</p> <p><b>Vietnamese/Tiếng Việt</b></p> <p>Nếu cần một thông ngôn viên để giúp quý vị điền đơn này, xin liên lạc với văn phòng Sở Gia Cư địa phương của quý vị.</p>
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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 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.

**2****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.

Yes  No



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.hpw.qld.gov.au](http://www.hpw.qld.gov.au).

- Formal Guardian and/or Administration 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.

**3****Your address and contact details.**

What is your current address?

Postcode

What is your mailing address?

Postcode

Telephone  
 Private   Business    
 Mobile  **Note** - the department may also send you information by SMS (text messages).  
 Email

**Please indicate the way you would prefer the department contact you**   
*(eg telephone, letter, SMS, email. Note - you can list more than one way)*

**You must advise us of any change to this address or your application may be cancelled.**

**4****Please provide the name of a relative, friend or organisation with a different address to you, whom the department could contact if unable to contact you directly.**

Person/organisation

Address

Postcode

Telephone Private / Mobile   Business

**5****Are you, or any person to be housed with you, a currently living in a Department of Housing and Public Works rental property?**

Yes  No

If yes, name of person

Address of property

Account number (if known)  Date occupied (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

Household member role

Name of the community housing provider

Date occupied (if known)

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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:

	First Time	Second Time
Public rental housing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Aboriginal and Torres Strait Islander housing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Bond loan assistance	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Housing loan assistance	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Community-managed housing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Indigenous community housing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Indigenous Council community housing	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

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.

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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

# 10

## 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	<b>Applicant</b>			
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Torres Strait Islander origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Australian South Sea Islander origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Another cultural or linguistic background	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is your residency status in Australia? (please tick  the option that applies for each person's residency status)

Australian citizen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanent resident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a permanent protection visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Resolution of Status visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Bridging Visa and have applied for a permanent protection visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On a Bridging Visa and have applied for a Resolution of Status visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have applied for permanent residency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Temporary Protection Visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not a permanent resident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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 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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Torres Strait Islander origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Australian South Sea Islander origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Another cultural or linguistic background	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is your residency status in Australia? (please tick  the option that applies for each person's residency status)

Australian citizen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanent resident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a permanent protection visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Resolution of Status visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Bridging Visa and have applied for a permanent protection visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On a Bridging Visa and have applied for a Resolution of Status visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have applied for permanent residency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have a Temporary Protection Visa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not a permanent resident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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](http://www.hpw.qld.gov.au).

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

### Do you own, or any household member, 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)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Vacant land of any type</b> (including residential, commercial or industrial etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Live-aboard boat, caravan, mobile home, donga or cabin</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Industrial property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Commercial property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Name of person who owns or part owns the property

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 ownership

**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
<b>Surname</b>				
<b>First name / s</b>				
<b>Income \$</b>	\$	\$	\$	\$
<b>Income type</b> (wages, pension, allowance, family payments)				
<b>Other income</b> (for example, maintenance, superannuation, etc.)				

**Do you own, or any household member, 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)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Vacant land of any type</b> (including residential, commercial or industrial etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Live-aboard boat, caravan, mobile home, donga or cabin</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Industrial property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Commercial property</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Name of person who owns or part owns the property

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 ownership



### 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.**



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

Household member	No.1	No.2	No.3	No.4
<b>Balance of all cash and bank accounts</b> (including bank, building society, credit union and interest free accounts)	\$	\$	\$	\$
<b>Deposits</b> (including interest free bearing deposits, fixed deposits etc)	\$	\$	\$	\$
<b>Bonds</b>	\$	\$	\$	\$
<b>Debentures</b>	\$	\$	\$	\$
<b>Shares</b> (Australian and international)	\$	\$	\$	\$
<b>Property Trusts</b>	\$	\$	\$	\$
<b>Managed investments of any type including friendly society bonds</b>	\$	\$	\$	\$
<b>Superannuation</b> - 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)	\$	\$	\$	\$
<b>Proceeds from a property sale</b>	\$	\$	\$	\$
<b>Share of a property settlement</b>	\$	\$	\$	\$

**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.



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

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

**13****Are any of the household members on the application 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 your household. Note - if you do not tick any of the grounds below, you are declaring that you and your household are not applying for housing for any of these reasons.**

- |   |  |
|---|--|
| <input type="checkbox"/> Referral from Disability Services or a non-government support provider - Housing with Shared Support (HwSS) program to fill an individual vacancy in an existing household   | <input type="checkbox"/> You are in contact with Child Safety Services for assistance with your family                                       |
| <input type="checkbox"/> Referral from Disability Services or a non-government support provider - Housing with Shared Support (HwSS) program to be a member of a new household  | <input type="checkbox"/> You are exiting a correctional facility   |
| <input type="checkbox"/> 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 | <input type="checkbox"/> You have been the victim of a natural disaster affecting your current housing                                       |
| <input type="checkbox"/> Referral from Child Safety Services as the safety of a child in your care is at risk   | <input type="checkbox"/> You have been the victim of a major crime affecting your current housing  |
|   | <input type="checkbox"/> You are a young person aged up to 21 who is exiting or have exited the care of the State                            |
|   | <input type="checkbox"/> Referral from a support provider as receiving assistance under the Street to Home or 50 Lives: 50 Homes Initiatives |
|   | <input type="checkbox"/> None of the above   |

**15****Which of the following best describes your current housing situation?****Note - you can tick  more than one if the people listed on your application are not currently living together.**

- |   |   |
|---|---|
| <input type="checkbox"/> Public housing or Aboriginal and Torres Strait Islander housing  | <input type="checkbox"/> Private boarding house   |
| <input type="checkbox"/> Community Housing - including long term community housing, affordable housing and longer term Community Managed Studio Units   | <input type="checkbox"/> Private hostel   |
| <input type="checkbox"/> 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 | <input type="checkbox"/> Caravan park   |
| <input type="checkbox"/> Community Housing - transitional (including Community Rent Scheme, Same House Different Landlord and transitional Community Managed Studio Units program)  | <input type="checkbox"/> Cabin  |
| <input type="checkbox"/> Medical institution/facility or hospital and have no other housing to go to  | <input type="checkbox"/> Donga  |
| <input type="checkbox"/> Correctional facility  | <input type="checkbox"/> Hotel / motel  |
| <input type="checkbox"/> Own home   | <input type="checkbox"/> Living on the street or sleeping in the park                     |
| <input type="checkbox"/> Renting privately (including sharing a house/flat)   | <input type="checkbox"/> Living or squatting in a derelict, makeshift or illegal building |
| <input type="checkbox"/> Boarding privately   | <input type="checkbox"/> Living with family or friends                                    |
|   | <input type="checkbox"/> Living on a boat   |
|   | <input type="checkbox"/> Living in Indigenous council housing                             |

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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  the applicable 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 the 34 discrete Indigenous communities. If you are not only applying to live on the same Indigenous community that you are already living on, please go to Q17.

How many different family groups, or different household groups, live in your current 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
<b>Total</b>		\$ .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).

	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
			<b>TOTAL</b>	\$ .00	\$ .00

19

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.

- |  |  |
|--|--|
| <input type="checkbox"/> The boarding house has closed or is about to close  | <input type="checkbox"/> 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  |
| <input type="checkbox"/> The hostel has closed or is about to close  | <input type="checkbox"/> The features of the current housing restrict household members from doing daily living activities (e.g. bathing, mobility)  |
| <input type="checkbox"/> The caravan park has closed or is about to close  | <input type="checkbox"/> The current housing is overcrowded causing serious long term safety risks   |
| <input type="checkbox"/> Household is facing immediate eviction and has no other housing options   | <input type="checkbox"/> The current housing lacks essential facilities (e.g. cooking, bathroom, water supply, heating, lighting etc)  |
| <input type="checkbox"/> You need to leave your current housing due to a domestic violence situation   | <input type="checkbox"/> The current housing's structural condition could lead to serious health and safety risks  |
| <input type="checkbox"/> You need to leave your current housing due to a risk of violence from another household member, neighbour or community member           | <input type="checkbox"/> You are living in housing <b>with shared facilities</b> which no longer meets your needs (e.g. private boarding house, hostel, caravan park, hotel, motel or community managed social housing) and you want to apply for self contained housing |
| <input type="checkbox"/> There has been an irreversible family breakdown resulting in the person being asked to live elsewhere (not domestic violence situation) |  |
| <input type="checkbox"/> You are living with family and friends on a temporary basis and are at risk of homelessness   | <input type="checkbox"/> None of the above   |
| <input type="checkbox"/> The family unit needs to reunite as they are currently living apart   |  |

20

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 of 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 needing to move for cultural reasons
- 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 family or house, or to be located away from other people of a different kin network.

21

If you did not tick any of the reasons in Question 20, please go to Question 22.

If you did tick any of the reasons in Question 20, what are the required location/s you need access to?

[Empty text box for required location/s]

Can you 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?

Public transport (trains, bus, taxi, ferry etc) Yes  No

Own transport Yes  No

Other transport (eg family/ friends) Yes  No  If yes, please specify what type

[Empty text box for specifying transport type]

22

If you are applying to live on an Indigenous community only, please go to Question 23.

What 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

23

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  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 household member having an intellectual disability
- Due to a household member having a 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?**

**Note - please tick  all reasons which apply to your household's attempts to find suitable housing. Note - if you do not tick any of the reasons below, you are declaring that you and your household are not having difficulty obtaining housing in the private market for any of these reasons.**

- Lack of housing available with suitable modifications for your household's needs
- Lack of housing available which is affordable for your household
- Lack of housing available with enough bedrooms for your 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 or referees
- A household member has a poor tenancy history either with the department or in the private market (e.g. listed on TICA)
- The private rental applications you lodged were unsuccessful due to the personal attributes of the applicant (e.g. personal appearance/characteristics)
- The household has no money to purchase essential household items (e.g. a fridge)
- The household has no money to move
- The household has no personal transport and cannot access public transport
- You have been unable to find suitable housing due to your household's structure (eg due to the size of your household)

**25**

**Have you had three or more tenancies in the last three years?**

Yes  No

**If yes, were you evicted, or was the tenancy terminated, in two of the last three tenancies for any of the following reasons?**

**Note - please tick  all of the reasons which best describe why the tenancies ended.**

- You owed rent arrears due to unaffordable rent
- One or more of the tenancies was short term only (ie a tenancy less than 12 months long) and you were asked to vacate at the end of each tenancy
- You or a household member has impaired capacity due to a medical condition or disability and this contributed to property damage occurring and/or your failure to keep the property clean and tidy as required by the terms of your tenancy agreement
- Objectionable behaviour - you or a household member has impaired capacity due to a medical condition or disability and this contributed to the objectionable behaviour occurring

**26**

**If you are applying to live on an Indigenous community only, please go to Question 27.**

**Where do you want to live?**

You must list six areas/ suburbs in Queensland where we have properties. If you have advised of a specific locational requirement in Q20 and Q21, please only list this location. For more Information on the areas where housing is located, please talk to your nearest Housing Service Centre.

Choice 1	<input type="text"/>	Choice 4	<input type="text"/>
Choice 2	<input type="text"/>	Choice 5	<input type="text"/>
Choice 3	<input type="text"/>	Choice 6	<input type="text"/>

**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.**

**27** If you are not applying to live on an Indigenous community only, please go to Question 28.

If you already live on a discrete Indigenous community and are only applying to live on the same community in Indigenous Council community housing - which Indigenous community do you want to remain on?

**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, however this cannot be guaranteed. Note - Housing with more than 4 bedrooms is limited.

Do you require low-set housing? Yes  No

You may tick  more than one type of housing you want to apply for.

- Townhouses** - have three or more units next to each other with one to four bedrooms each, divided by common walls. These can be either single or double-storey and usually have small fenced yards.
- Apartment/ flat/ unit** - is usually in a complex of two or more storeys with one to three bedrooms each. They do not have a separate yard.
- Detached houses** - 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 common wall. These may be in groups of two to four.
- Cluster housing** - is a number of separate homes with two to four bedrooms each, located within a housing development.
- Seniors units** are only available to applicants over 55 years of age and are usually in a complex of one or two storeys with one to two bedrooms each.

**29** Will you accept housing with shared facilities? Yes  No

Some housing may have shared living, bathroom and / or kitchen facilities. **Note** - if you accept an offer of housing which has shared facilities, you can choose to remain on the Housing Register for an offer of self contained housing.

**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:

- 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

- Full birth certificate or extract of birth certificate
- Passport
- Driver's licence with photograph
- 18 plus card with photograph
- Queensland shooter's licence with photograph
- Immigration papers or other documents issued by the Commonwealth Department of Immigration, Multicultural and Indigenous Affairs
- Naturalisation or citizenship certificate

#### Secondary

- Bank, credit card or ATM card with your signature
- Recent bank statements, bank book, credit union or building society statement showing recent transactions
- Apprenticeship indenture papers
- Other recognised photographic I.D. (e.g. security identification, Cash Converters Card)
- Original Australian marriage certificate or divorce papers
- 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 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](http://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 invalid.

Name of applicant/s	<input type="text"/>	<input type="text"/>	Date	<input type="text"/>
Signed by the applicant/s	<input type="text"/>	<input type="text"/>	Date	<input type="text"/>
Full name of witness	<input type="text"/>		Position	<input type="text"/>
Signature	<input type="text"/>		Date	<input type="text"/>

**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 sign 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	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signed	<input type="text"/>	Date	<input type="text"/>

## 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