





Part B - Application for Rentstart - Additional Persons Form

1.	Details of additional person Title Mr, Mrs, Ms, Miss, Mx			
	Last name			
	Given name(s)			
	Sex	Male Female Other		
	Date of birth	DD / MM / YYYY		
	Relationship to main applicant			
	Contact number			
	Email address			
	Centrelink Reference Number			
	Current residential address			
	Town/Suburb	Postcode		
2.	What is the main language you speak at home?	English Other give details		
	What language?	+		
3.	Do you need an interpreter when dealing with Homes NSW? This includes an interpreter for people with a hearing or speech impairment	Yes No		
4.	In what country were you born?			
5.	What is your current citizenship status?	Australian citizen (Australian born or obtained citizenship)		
		Permanent residency		
		Sponsored migrant		
		Refugee status		
Asylum seeker with bridging		Asylum seeker with bridging visa		
	What is your visa subclass number?			
	Date of arrival in Australia?	DD / MM / YYYY		
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6.	Are you of Aboriginal or Torres St Islander origin?	Yes No give details	Prefer not to say		
		Aboriginal			
		Torres Strait Islander			
		Aboriginal and Torres Strait Islander			
Inc	come Confirmation Sch	me Consent Authority			
	u or anyone on this application wish to consent form below.	ticipate in the Centrelink Income Confirmation S	Scheme please complete		
	consent will be used for the sole purpo eligibility for concessions or services p	of authorising Centrelink to provide information ided by Homes NSW.	to Homes NSW to assess		
-	น do not want Centrelink to provide yoเ mation required from Centrelink yourse	formation electronically to Homes NSW, you winnd provide it to Homes NSW.	ll need to obtain the		
Plea	se read and sign the consent and th	eclaration below:			
• I authorise Homes NSW to use Centrelink Confirmation eServices to perform a Centrelink enquiry of my Centrelink Customer details and concession card status in order for Homes NSW to determine if I qualify for a concession, rebate or service.					
•	 I authorise the Australian Government Department of Services Australia (the Agency) to provide the results of that enquiry to Homes NSW. 				
I understand that the Agency will use information I have provided to Homes NSW to confirm my eligibility for concessions, rebates or services and will disclose to Homes NSW my personal information including my name, address, concession card status, payment type, payment status, income, assets, one-off payments, deductions and shared care arrangements.					
•	• I understand that this consent, once signed, remains valid while I am a customer of Homes NSW unless I withdraw it by contacting Homes NSW or the Agency.				
•	• I understand that I can obtain proof of my circumstances/details from the Agency and provide it to Homes NSW so that my eligibility for concessions, rebates or services can be determined.				
•	I understand that if I withdraw my cons	t or do not alternatively provide proof of my circles or services provided by Homes NSW.	umstances/details, I may		
	Full (please				
	Signa				
		DD/MM/YYYY			
	More information about Centrelink Confirmation eServices is available from Centrelink or on Centrelink's website at www.servicesaustralia.gov.au/cces				
1. Pu ar co 2. I a	 Consent to Homes NSW Pursuant to Section 71 of the Housing Act 2001 and the Privacy and Personal Information Protection Act 1998, I consent, direct and authorise Homes NSW to disclose personal information regarding myself for the purpose of processing this application. This consent shall include disclosure to the Rental Bond Board and any relevant estate agency. I also authorise Homes NSW to collect personal information regarding myself from any third party for the purpose of processing this application and direct such third party to provide to Homes NSW the information sought. This authority extends to and includes collection of information from third parties arising from claims for bond at conclusion of the lease. 				
	ce use only - Documentation sighted te agent or staff from other NSW Gove	d certified (Can be completed by a Homes NS ent agencies)	W officer, licensed real-		
Citiz	enship Type	Number			
ID	Туре	Number			
Nam	e	Position			
Sign	ature	Agency			
Date		D / MM / YYYY			
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