Housing Pathways



Details of Land or Property Ownership

This form is to be completed by a tenant or an applicant for social housing if you, or someone in your household:

- owns or part owns land or property, or
- has sold or transferred ownership of land or property, or
- has an interest in land or property that is part of a deceased estate.

Note: This applies to residential or commercial land or property that is in Australia or overseas. Your household includes all of the people included on your Application for Housing Assistance or in your social housing tenancy.

Please use BLOCK LETTERS and print in black or blue pen only. Please mark all relevant boxes with a \checkmark . If you need more space, please write on a blank page and attach it to this form. For information or assistance with this form, phone 1800 422 322, 24 hours a day, 7 days a week.

Attach to this form one of the following documents:

- Deeds for the property or land
- Statement from a mortgage lender showing mortgage repayments or loan agreement
- Recent rate notices

Available online

MyHousing

- Professional evaluation of the market value
- Centrelink Income Statement, unless your household has already signed an Income Confirmation Scheme (ICS) Consent Authority

Questions that we need additional evidence for are marked with U

Office Use Only

T File number	Client reference number Application reference number
Client details Title	
Mr, Mrs, Ms, Miss, Mx	
Last name or family name	
First and middle name(s)	
Date of birth	DD/MM/YYYY
Unit/House number	Street/Avenue
Town/Suburb	Postcode
Details of the property/land	
1. Address Lot	Unit/House number
Street/Avenue	
Town/Suburb	Postcode
Country	

2. Is the property/land?	Commercial Residential	
2a. Is it? Attach proof.	Land only give the dimensions of the land	it, warehouse) luding the type of property
3. Is the property/land for sale? Attach proof.	Yes No give details including the advertised price and estimated settlement date	
 4. Is the property/land? Attach receipts showing any rent or other income currently received from the property/land. 	Vacant Rented give details of the weekly rent red and the managing agent (where applicable)	
 4a. If someone is renting the property/land, when does the agreement expire? 5. Is the property/land subject to a legal dispute? Attach proof. 	DD/MM/YYYY Yes No	
6. Is the property/land part of a deceased estate?	Yes — go to Part A No	
 Who owns the property/land? Note: this includes joint tenancy and tenancy in common. 		
Name of owner(s)	Relationship to you	% owned
7a. Is the property/land title registered in another name?	Yes No provide the name on the land title	

8. Date of purchase	DD/MM/YYYY		
9. Purchase price	\$		
0. Is the property/land still owned by the person/s listed in question 7?	Yes	No — go to Pa	t B
1. Are loan repayments being made on the property/land?	Yes amount of repayment per week	No	
	•		
12. What is the balance owing on the property/land? (excluding interest)	\$		
3. What is the current market value of the property/land?	\$		
If <u>you</u> or your <u>partner</u> own or p	part own the property	v or land com	plete Part C
Part A - Complete this section if the p			-
 4. Who are the beneficiaries of the property/land? 	operty/land is part of a		•
lame of beneficiaries	Relationship to you		Expected return
			\$
			\$
			\$
			\$
5. Who is the executor of the estate?			
6. What is the outstanding debt owing on the property/land? (if any)	\$		
7. Are you or a member of your household in a position to purchase the property/land?	Yes	No	
Part B - Complete this section if the proof your household	roperty/land is no longe	r owned by you	or a member
8. Date of sale or transfer of ownership	DD/MM/YYYY		
Attach a solicitor's statement to show equity from the sale of the property or transfer of ownership.		1	
9. Sale price (if applicable)	\$		
13013 11/19			Page 3 c

20. Net amount received by you and/or a member of your household	\$		
21. Solicitor's name and contact details			
Part C - Complete this section if <u>you</u> o	or your <u>partner</u> own or part own the j	property or land	
22. If it is a property with a dwelling, why can't you live in it? Attach proof.	It doesn't have enough bedrooms A member of your household has special housing requirements - see item 22 on the Evidence Requirements Information Sh It is not habitable - see item 14 on the Evidence Requirements Information Sh It is in an isolated location It is interstate It is overseas It is subject to a legal dispute Other give details		
23. If it is land, why can't you build on it? Attach proof.			
24. Can the property/land be sold?	Yes No		
Attach proof.	give reasons		
Attach proof. 25. Consent of additional person	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing. the proper use of my personal informat	nission for their personal b be collected by the tion by social housing	
Attach proof. 25. Consent of additional person If a person included on this form is AGED 16 YEA information to be collected by the tenant or applic To do this, they need to read the statement below I give my permission for:	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing.	nission for their personal b be collected by the tion by social housing	
Attach proof. 5. Consent of additional person If a person included on this form is AGED 16 YEA information to be collected by the tenant or applic To do this, they need to read the statement below I give my permission for:	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing. the proper use of my personal informat providers in order to process this form.	nission for their personal b be collected by the tion by social housing	
Attach proof. 5. Consent of additional person If a person included on this form is AGED 16 YEA information to be collected by the tenant or applic To do this, they need to read the statement below I give my permission for:	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing. the proper use of my personal informat providers in order to process this form.	nission for their personal b be collected by the tion by social housing	
Attach proof. 5. Consent of additional person If a person included on this form is AGED 16 YEA information to be collected by the tenant or applic To do this, they need to read the statement below I give my permission for:	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing. the proper use of my personal informat providers in order to process this form.	nission for their personal b be collected by the tion by social housing Date DD/MM/YYYY	
Attach proof. 25. Consent of additional person If a person included on this form is AGED 16 YEA information to be collected by the tenant or applic To do this, they need to read the statement below	ARS AND OVER they must provide their written perm cant for social housing. w and sign and date this form. my personal information on this form to tenant or applicant for social housing. the proper use of my personal informat providers in order to process this form.	nission for their personal b be collected by the tion by social housing Date DD/MM/YYYY DD/MM/YYYY	

26. DCJ Privacy Notice

This privacy notice applies to the Department of Communities and Justice (the Department). The Department together with its related agencies complies with NSW privacy legislation when collecting and managing personal and health information. The information we collect from you or from an authorised third party will be held by the program that collects it. It will be used to deliver services and to meet our legal responsibilities. We may also use your information within the Department as a whole to plan, coordinate and improve the way we provide services and may exchange your information with other social housing providers for the purpose of assessing your continuing eligibility for social housing and providing an appropriate service. The Department is also legally authorised to disclose information to outside bodies in certain circumstances.

Further information about your privacy rights can be found on the Department's website: www.facs.nsw.gov.au/ site_information/privacy or by calling: 02 9377 6000 or by emailing: privacy@facs.nsw.gov.au.

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. The Department may also collect information from your former social housing landlord or their agent (if you have one), including information about any debt.

Declaration

- I understand the instructions given on this application.
- To the best of my knowledge, the information provided in this application is correct.
- I understand there are penalties for giving false or misleading information.
- I understand and agree that DCJ may collect information from my former social housing landlord or their agent, including information about any debt.
- I consent to the personal and medical information I have provided in this application, and which is stored in DCJ' records, being shared with other social housing providers so that appropriate services can be identified and delivered.

Title Mr, Mrs, Ms, Miss				
Last name or family name				
First and middle name(s)				
Signature				
Date	DD/MM/YYYY			
27. Is there another person helping you to fill out this form?	Yes No that person should read and sign the declaration below			
Declaration from the person assisting or comp	leting this application on behalf of the tenant or applicant			
 I have filled out this form on the basis of the information the tenant/applicant gave me. I have read out the form and the answers to the tenant/applicant who seemed to understand them. I understand there are penalties for giving false or misleading information. 				
Title Mr, Mrs, Ms, Miss				
Last name or family name				
First and middle name(s)				

Signature