

Housing Pathways

Tenancy Assistance Application

Use this form to apply for help to get assistance in sustaining a tenancy in the private rental market What is Tenancy Assistance? Tenancy Assistance can help you sustain your private rental tenancy by For more information about Tenancy Assistance, go helping to pay for rent and/or water arrears. You are able to apply once in a to www.facs.nsw.gov.au and read the Tenancy 12-month period for the equivalent of up to four weeks rent, however most Assistance fact sheet clients will receive less than this. Tenancy Assistance is not a loan and does not have to be repaid. Can I get Tenancy Assistance? To be eligible for Tenancy Assistance, you will have to meet certain income and other criteria, and be a resident of NSW. For more information about eligibility for Tenancy Assistance, go to www.facs.nsw.gov.au or phone 1800 422 322, 24 hours a day, seven days a week. How do I apply? If you need help to fill in this form, if you need an interpreter or if the reasons you are seeking assistance are too sensitive to write down, ask a staff member to help you. If there is one available, you can ask to see a male or female officer, and/or you can also ask for an Aboriginal officer. Please provide all the information listed below for yourself and each person 18 years or over in your household. Two forms of identification (e.g. driver's licence, passport **OR** confirmation of identification signed by your real estate agent or a government employee) Statements for your bank accounts for the last four weeks (displaying history of transactions or savings bank passbook) Completed Property Information Form (Part B - to be completed by your real estate agent or landlord) Proof of income - your income confirmation details MUST be current. You will need to fax proof of income with your application, unless your sole income is from Centrelink. If this is the case, sign the Centrelink release of information section on page 13. Proof of income includes pay slips, they must show Year to Date (YTD) salary figures. If you are unable to provide the YTD figures, four current payslips need to be shown, or you can have your employer complete an Income from Employment form (Part C) Proof of current assets Passport or current visa (if you are not an Australian Citizen) Evidence of the arrears, which could include: A letter or statement of account from the landlord or agent detailing the arrears. A repayment plan agreed to by the tenant and landlord or agent, in writing and signed by both signatories. Notice of Termination by the landlord or agent. Letter undertaking to preserve the security of the tenancy subject to no further breaches of the agreement. Notice from the NSW Civil and Administrative Tribunal. Evidence of agreement with landlord/agent to continue the tenancy for up to 12 months should the arrears be paid Note: We will not be able to process an incomplete application. Checklist: Have you completed (and signed where relevant) Part A - Application for Tenancy Assistance form Part B - Tenancy Assistance Property Information form - to be completed by the real estate agent or property owner Part C - Tenancy Assistance Income from Employment form or payslips - if you are employed It is illegal for anyone working for Homes NSW or a community housing provider to ask for money or favours or other benefits of any kind in exchange for helping you with your housing needs. It is also illegal for you or anyone else to offer money or favours or other

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benefits of any kind to anyone who works for Homes NSW or a community housing provider for helping you. If you have any

information regarding possible corrupt conduct you can report it by calling 1800 422 322.

Acknowledgement of receipt of application

Receipt of Tenancy Assistance Application Title	
from this person is hereby acknowledged Mr, Mrs, Ms, Miss, Mx	
Last name or family name	
First and middle name(s)	
Unit/House	
number	
Street/Avenue	
Town/Suburb	Postcode
Receipt details Office	
Receiving office Admin Unit	
Name of receiving officer	
Signature of receiving officer	
Contact number	
Date	DD/MM/YYYY
Office date stamp	
Application Method	APPL - Application
	INPERSON - Assessed face to face / personal contact
	COUNTER—Received at front counter
OFFICE T File number USE	Client reference number Application reference number
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Tenancy Assistance Application

Please use BLOCK LETTERS and print in black or blue pen only. Please mark all relevant boxes with a x. If you need more space, please write on a blank page and attach it to the application.

	rsonal details of main applican	• • • • • • • • • • • • • • • • • • • •		
1.	Your name Attach proof of your identity. See item 1 on the Evidence Requirements Information Sheet for details. Title Mr, Mrs, Ms, Miss, Mx Last name or family name First and middle name(s)			
2.	Do you need an interpreter? This includes an interpreter for people who have a hearing or speech impairment. What language?	Yes give details	No — Go to	3.
3.	Are you known by another name? (for example, previous family name) What name?	Yes give details Family Name	No → Go to	4. st Name
4.	What is your Centrelink Reference Number? (if applicable)			
5.	Sex	Male	Female	Other
6. ()	Date of birth Note: If you are under 18 years of age, specific evidence is required. See the Evidence Requirements Information Sheet for details.	DD/MM/YYYY		
7.	Residential address Attach proof of NSW residency. See item 2 on the Evidence Requirements Information Sheet for details. Unit/House number Street/Avenue Town/Suburb			Postcode
7a.	Are you staying at the above address?	Yes	No	
8.	Contact details Note: Housing Pathways providers may use any of the contact details you provide. Contact number Email			

8a.	Is your mailing/contact address the same as your residential address?	Yes — Go to 8b. No give details
	Unit/House number	
	Street/Avenue	
	Town/Suburb	Postcode
8b.	Who should we contact about your application?	Contact me directly Contact a third party (for example, a support worker, advocate, friend or relative)
		You will need to complete the General Consent to Exchange Information & Authority to Act on Client's Behalf form which can be downloaded from www.facs.nsw.gov.au.
9.	In what country were you born?	
10.	Are you of Aboriginal and/or Torres Strait Islander descent?	Yes
\bigcup	See item 3 on the Evidence Requirements Information Sheet for details.	Aboriginal Torres Strait Aboriginal and/or Torres Strait Islander
11.	What is the main language you speak at home?	English Other — give details
12.	What is your current citizenship? Attach proof if you are an Australian citizen. See item 4 on the Evidence Requirements Information Sheet for more information.	Australian citizen (Australian born or obtained citizenship) — Go to 14.
13.	What is your current residency status/visa category?	Permanent resident
	Attach proof. See item 5 on the Evidence Requirements Information Sheet for details.	Sponsored migrant New Zealand Special Category Visa
O		Refugee/humanitarian Asylum seeker
	Visa subclass number (if not relevant, write 'not applicable') Date of arrival in Australia	DD/MM/YYYY
14.	Do you or anyone on this application currently live in a social housing property? Note: Social housing properties include	Yes No — Go to 15. name of person who currently lives in a social
	public housing, Aboriginal housing and community Name housing.	housing property Family Name First Name
14a.	If it is a community housing or Aboriginal housing property, what is the name of the provider that manages this property?	

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15.	Have you or anyone on this applicatived in a social housing property before?		Yes name of person who used to live in a social	No → Go t	o 16.
0	If you are a former social housing tenant or occupant additional evidence may be required. See item 6 on the Evidence Requirements Information Sheet for details.	Name	housing property Family Name	Fi	rst Name
15a	. Address of the property	t/House number			
	Street	/Avenue			
	Town	/Suburb			Postcode
15b	. If it was a community housing or Aboriginal housing property, wha the name of the provider that mar that property?				
Inc	come and assets of main	applic	ant		
16.	Do you own (or part own) any res or commercial property or land (including any property overseas)		Yes give details	No — Go t	o 17.
\bigcup	Attach proof. See item 7 on the Evidence Requirements Information Sheet for details.		Address of the property or	land	
17.	What is your income before tax? You are required to list each type of income	ome you	Type of income	Paid Weekly	Amount of income
	receive. Note: Income includes pension paymer (including overseas pension), allowance support payments, wages, casual earnir income from self-employment, regular in payments, interest from the bank, intere investments, income from property owners.	s, child ngs, isurance st from		☐ Fortnightly ☐ Weekly ☐ Fortnightly ☐ Weekly ☐ Fortnightly ☐ Weekly	\$ \$ \$
	If you receive a Centrelink benefit, included tails on the Income Confirmation School (ICS) Consent Authority on page 15 of to or on a separate community housing inconfirmation form. By signing this ICS A you give permission for Homes NSW contact Centrelink to check your income will not need to provide any further evide your Centrelink payment. Attach proof. See item 8 on the Evidence	eme nis form ome uthority to and you ence of		☐ Fortnightly	
	Requirements Information Sheet for deta				
17a	. What is the value of your savings financial assets? You are required to list each type of fina		Type of financial asset		Value of asset
	asset you own. Note: Include all bank accounts, saving				\$
0	accounts, cash, shares, term deposits, e Attach proof. See item 9 on the				\$
	Evidence Requirements Information Sheet for details.				\$

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18.	Do you make regular child support payments?	Yes give details	No → Go to 19.	
	Attach proof. See item 10 on the Evidence Requirements Information Sheet for details.	How do you pay?	How often do you pay?	How much do you pay?
0	mornation officer for details.	☐ Through a government agency☐ Directly to the person		\$
		☐ Through a government agency☐ Directly to the person	,	\$
19.	Do you have ongoing expenses due to a disability, medical condition or permanent injury?	Yes give details	√lo — Go to 20.	
N	Attach proof. See item 11 on the Evidence Requirements	What is it for?	How often do you pay?	How much do you pay? (approximately)
y	Information Sheet for details.			\$
				\$
				\$
				\$
	Note: If there are other household members living with you, please include their details in the Additional Person Information section of this form when you get to it. For an expected baby, you only need to provide the details in question 20a.	living with you (including an expected baby)		
20a	. Is anyone on this application expecting a baby?	Yes give the due date	lo — Go to 21.	
	Attach documents that support your answer. See item 12 on the <i>Evidence Requirements Information Sheet</i> for details.	DD/MM/YYYY		
21.	Is anyone on this application an	Yes give details	√lo — Go to 22.	
	employee of a social housing provider? Name of person	Family Name	First Na	ame
	Note: This includes all employees of Homes NSW or community housing providers in NSW. Name of social housing provider			

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Yo	ur circumstances		
22.	Have you received Rental Arrears assistance in the past 2 years? Note: Applying more than once within a 2 year period may lower the amount of assistance you are provided	Yes give details	No — Go to 23.
23.	Do you have a current Notice of Termination? Attach your Notice of Termination	Yes give details	No — Go to 24.
24.	Have you been able to negotiate a repayment plan for the rental arrears? Attach your repayment plan signed by yourself and the landlord/agent	Yes give details	No

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DCJ Privacy Notice

This privacy notice applies to the Department of Communities and Justice (DCJ) which includes the following entities: the Land and Housing Corporation and the Aboriginal Housing Office. DCJ and its related entities comply 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 DCJ or the entity that collects it. It will be used to deliver services and to meet our legal responsibilities. We may also use your information within DCJ as a whole to plan, coordinate and improve the way we provide services. DCJ 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.dcj.nsw.gov.au/site_information/privacy or by calling: 02 9377 6000.

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. DCJ 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, Mx	
Last name or family name	
First and middle name(s)	
Signature	
Date	DD/MM/YYYY
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 completing this application on behalf of the applicant

- I have filled out this form on the basis of the information the applicant gave me.
- I have read out the form and the answers to the applicant who seemed to understand them.
- I understand there are penalties for giving false or misleading information

understand there are penalties for giving rais	e of misleading information.
Title	
Mr, Mrs, Ms, Miss, Mx	
Last name or family name	
First and middle name(s)	
Signature	
Date	DD/MM/YYYY Phone

PLEASE NOTE

If other people are going to be living with you, enter their details in the Additional Person Information section on page 9 of this form. You will also need to get each additional person aged 16 years and over to sign the consent on page 14.

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Additional Person Information

This section is to be completed by the main applicant. Please include the details of each person to be housed with you.

Questions that we need evidence for are marked with $\hat{\parallel}$. See the *Evidence Requirements Information Sheet* for details. If you need more space, please write on a blank page and attach it to the application.

A1. Personal details of additional person			
Person 1 Mr, Mrs, Ms, Miss, Mx			
See item 1 on the Evidence Requirements Information Last name			
Sheet for details. or family name			
First and middle name(s)			
Is this person known by another name?	Yes	No	
(for example, previous family name)	give details		
What name?	Family Name	First N	ame
Relationship to you			
Centrelink Reference Number			
(if applicable)			
Sex	Male	Female	Other
Date of birth	DD/MM/YYYY		
Does this person have a different residential address from you?	Yes address of person	No	
Contact number			
Email			
Is this person of Aboriginal and/or Torres Strait Islander descent?	Yes give details	No	Prefer not to say
See item 3 on the Evidence Requirements Information Sheet for details.	Aboriginal	Torres Strait Islander	Aboriginal and/or Torres Strait Islander
What is this person's current citizenship or residency status?	Australian citizen	Permanent resident	Sponsored migrant
See items 4 and 5 on the Evidence Requirements Information Sheet for details.	New Zealand Special Category Visa	Refugee/ humanitarian	Asylum seeker
Visa subclass number (if not relevant, write 'not applicable')			
Date of arrival in Australia (if applicable)	DD/MM/YYYY		
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Person 2 Mr, Mrs, Ms, Miss, Mx See item 1 on the Evidence Requirements Information Sheet for details. Title Last name or family name First and middle name(s)			
Is this person known by another name? (for example, previous family name) What name?	Yes give details Family Name	No First N	lame
Relationship to you			
Centrelink Reference Number (if applicable)			
Sex	Male	Female	Other
Date of birth	DD/MM/YYYY		
Does this person have a different residential address from you?	Yes address of person	No	
Contact number			
Is this person of Aboriginal or Torres Strait Islander descent? See item 3 on the Evidence Requirements Information Sheet for details.	Yes give details Aboriginal	No Torres Strait Islander	Prefer not to say Aboriginal and Torres Strait Islander
What is this person's current citizenship or residency status?	Australian citizen	Permanent resident	Sponsored migrant
See items 4 and 5 on the Evidence Requirements Information Sheet for details.	New Zealand Special Category Visa	Refugee/ humanitarian	Asylum seeker
Visa subclass number (if not relevant, write 'not applicable')			
Date of arrival in Australia (if applicable)	DD/MM/YYYY		

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Person 3 Mr, Mrs, Ms, Miss, Mx See item 1 on the Evidence Requirements Information Sheet for details. Last name or family name First and middle name(s)	
Is this person known by another name? (for example, previous family name) What name?	Yes Sive details Family Name No First Name
Relationship to you	
Centrelink Reference Number (if applicable)	
Sex	Male Female
Date of birth	DD/MM/YYYY Prefer not to say
Does this person have a different residential address from you? Contact number	Yes No Other
Email	
Is this person of Aboriginal and/or Torres Strait Islander descent? See item 3 on the Evidence Requirements Information Sheet for details.	Yes give details Aboriginal Torres Strait Islander Strait Islander
What is this person's current citizenship or residency status? See items 4 and 5 on the Evidence Requirements Information Sheet for details.	Australian citizen Permanent resident Sponsored migrant New Zealand Special Category Visa Permanent resident Sponsored migrant Refugee/ humanitarian seeker
Visa subclass number (if not relevant, write 'not applicable') Date of arrival in Australia (if applicable)	DD/MM/YYYY

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Person 4 Mr, Mrs, Ms, Miss, Mx See item 1 on the Evidence Requirements Information Sheet for details. Last name or family name First and middle name(s)			
Is this person known by another name? (for example, previous family name) What name?	Yes give details Family Name	No First Na	me
Relationship to you			
Centrelink Reference Number (if applicable)			
Sex	Male	Female	Other
Date of birth	DD/MM/YYYY		
Does this person have a different residential address from you?	Yes address of person	No	
Contact number Email			
Is this person of Aboriginal and/or Torres Strait Islander descent? See item 3 on the Evidence Requirements Information Sheet for details.	Yes give details Aboriginal	No Torres Strait Islander	Prefer not to say Aboriginal and/or Torres Strait Islander
What is this person's current citizenship or residency status?	Australian citizen	Permanent resident	Sponsored migrant
See items 4 and 5 on the Evidence Requirements Information Sheet for details.	New Zealand Special Category Visa	Refugee/ humanitarian	Asylum seeker
Visa subclass number (if not relevant, write 'not applicable')			
Date of arrival in Australia (if applicable)	DD/MM/YYYY		
If there are more than four additional people on your ap it	PLEASE NOTE plication, ask for a copy of the Ac from www.facs.gov.au.	dditional Person Informa	tion form or download

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A2.	Do any additional persons own (or part own) any residential or commercial property or land (including any	Yes						
0	property overseas)?	Name of additional person	Address	of the property or land				
IJ	See item 7 on the Evidence Requirements Information Sheet for details.							
A3.	You are required to list each type of income received by each person. If your partner is under 18 years of age, list their in							
	Note: Income includes pension payments (including overseas pension), allowances, child support payments, wages, casual earnings, income from self-employment, regular insurance payments, interest from the bank, interest from investments, incomfrom property ownership, etc.							
U	If any of the additional persons receives a Centrelink benefit, they can include their details on the Income Confirmation Schem (ICS) Consent Authority on page 15 of this form or on a separate community housing income confirmation form. By signing the ICS Authority, they give permission for Homes NSW to contact Centrelink to check their income and they will not need to provide any further evidence of their Centrelink payment.							
Ų	See item 8 on the Evidence Requirements Inform	nation Sheet for details.						
Nam	e of additional person	Type of income	Paid	Amount of income				
			☐ Weekly☐ Fortnightly	\$				
			☐ Weekly ☐ Fortnightly	\$				
			☐ Weekly ☐ Fortnightly	\$				
			☐ Weekly ☐ Fortnightly	\$				
			☐ Weekly ☐ Fortnightly	\$				
			☐ Weekly ☐ Fortnightly	\$				
\cap	List the savings/financial assets of each a You are required to list each type of financial asse assets. Note: Include all bank accounts, savings accounts	t owned by each person. If yo	ur partner is under	18 years of age, list their				
- 11	See item 9 on the Evidence Requirements Information Sheet for details.							
Name	of additional person	Type of financial asset		Value of asset				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				

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	Do any additional persons make regular child support payments?	Yes give details	No — Go to A5.	
	See item 10 on the Evidence Requirements Information Sheet for details.	1		
Name	e of additional person	How do they pay?	How often do they pay?	How much do they pay?
		☐ Through a government agence ☐ Directly to the person	У	\$
		☐ Through a government agence ☐ Directly to the person	У	\$
		☐ Through a government agence ☐ Directly to the person	У	\$
		☐ Through a government agence ☐ Directly to the person	У	\$
		☐ Through a government agence ☐ Directly to the person	У	\$
		☐ Through a government agence ☐ Directly to the person	У	\$
	Do any additional persons have ongoing expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	Yes give details	No — Go to A6.	
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements		How often do	
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details		
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details	How often do	pay? (approximate
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details	How often do	pay? (approximate
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details	How often do	pay? (approximate \$
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details	How often do	\$
	expenses due to a disability, medical condition or permanent injury? See item 11 on the Evidence Requirements Information Sheet for details.	give details	How often do	pay? (approximate \$ \$ \$ \$ \$

information to be collected by the main applicant. To do this, they need to read the statement below and sign and date this form.

I give my permission for:

- my personal information on this form to be collected by the main applicant.
- the proper use of my personal information by social housing providers in order to process this application.

Name of additional person	Signature of additional person	Date
		DD/MM/YYYY

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Income Confirmation Scheme Consent Authority

If you or anyone on this application wish to participate in the Centrelink Income Confirmation Scheme please complete the consent form below.

This consent will be used for the sole purpose of authorising Centrelink to provide information to Homes NSW to assess your eligibility for concessions or services provided by Homes NSW.

If you do not want Centrelink to provide your information electronically to Homes NSW, you will need to obtain the information required from Centrelink yourself and provide it to Homes NSW.

Please read and sign the consent and the declaration 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 Services Australia to provide the results of that enquiry to Homes NSW.
- I understand that Services Australia 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 Services Australia.
- I understand that I can obtain proof of my circumstances/details from Services Australia 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 consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the concessions, rebates or services provided by Homes NSW.

Family name	Given name(s)	Date of birth	Centrelink Customer Reference Number	Signature	Date
		DD/MM/YYYY			DD/MM/YYYY
		DD/MM/YYYY			DD/MM/YYYY
		DD/MM/YYYY			DD/MM/YYYY
		DD/MM/YYYY			DD/MM/YYYY
		DD/MM/YYYY			DD/MM/YYYY

More information about the Centrelink Confirmation eServices is available from a Centrelink office or on Centrelink's website at www.servicesaustralia.gov.au.

Important:

Please ensure that you advise Homes NSW in writing within 28 days of any changes to the occupants of the household, or any changes to the income or assets of any person in the household.

This is required even if you have given Income Confirmation Scheme consent, or told Centrelink.

Interpreting Services

If you need help with interpreting or translation because English is not your first language, phone the *All Graduates Interpreting and Translating Service* on 1300 652 488. They will phone the Housing Pathways provider and interpret for you for free.

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