

# **Application for Rental Bond Loan**

Office Use Only		
Application Number: Application Date:		
Officer Name:	Time:	
	Loan Account Number:	

#### **Eligibility For A Rental Bond Loan Instructions To Complete Application** You must live, work or be enrolled to study in the You must complete <u>all</u> sections of this application form, including nil responses. • You must be an Australian citizen, permanent Your application must be signed by all resident, or hold a time-limited visa for the applicants. purpose of seeking asylum, protection or safe Housing ACT staff must sight original haven in Australia. documentation to support your application, You meet the current income limits. including identity, residency status, educational You do not have an interest in a residential enrolment, income and assets. property in Australia. You must provide proof of income You meet the current cash and asset limit. documentation from your employer and/or You do not have any outstanding debts with Department of Human Services (Centrelink). Housing ACT. If self-employed, you must provide your most • The rental bond has not been paid. recent tax return, or a current profit and loss • You are able to satisfactorily meet the obligations statement and balance sheet certified by a qualified accountant. and payments required in sustaining a tenancy in a private rental property. • Lodging your application in person will assist in an earlier assessment. Alternatively, you can You agree to enter into a loan repayment post your application (see below). agreement with Housing ACT.

If you have any questions about your eligibility for a rental bond loan, or how to complete this form, please contact Housing and Community Services on **133 427**, or:

Attend in person
Nature Conservation House
Corner Benjamin Way and Emu Bank
Belconnen ACT 2617

Write to us:
Housing ACT
Locked Bag 3000
Belconnen ACT 2616

# **Accessibility**

The ACT Government is committed to making its information, services, events and venues, accessible to as many people as possible.

If you have difficulty reading a standard printed document and would like to receive this publication in an **alternative format** – such as large print – please telephone **133 427.** 

If English is not your first language and you require the **Translating and Interpreting Service** – please telephone **131 450.** 

If you are deaf or hearing impaired and require the **Text Telephone (TYY) Service** – please telephone **133 677 then ask for 133 427.** 

#### **Personal Details**

		Applicant 1	Applicant 2	
1	Title (please circle)	Mr Mrs Miss Ms Other	Mr Mrs Miss Ms Other	
2	Given Name(s)			
	Surname			
3	Former Surname (if applicable)			
4	Date of Birth	/ /	/ /	
5	Relationship to other Applicant (if applicable)			
6	Are you an Australian citizen or permanent resident?	☐ Yes ☐ No  If no, what is your residency status?	Yes No  If no, what is your residency status?	
7	Current residential address			
8	Postal Address (if different to address at 7)			
9	Telephone Number	(Home)(Work)(Mobile)	(Home)(Work) (Mobile)	
10	Email Address			
11	Do you live or work or are you enrolled to study in the ACT?	Live Yes No Work Yes No Study Yes No	Live Yes No  Work Yes No  Study Yes No	
12	Have you received any assistance from Housing ACT?	Yes No  If yes, was this for a <u>Bond Loan</u> or <u>Rented Property</u> ? (please circle)  Account Number	Yes No  If yes, was this for a Bond Loan or Rented Property? (please circle)  Account Number	
13	Do you owe any money to Housing ACT?	Yes No	Yes No	
Que	Question 14 *optional and for statistical purposes only			
14*	What is your cultural identify?  What is your country of	Aboriginal Torres Strait Islander Aboriginal & Torres Strait Islander Other	Aboriginal Torres Strait Islander Aboriginal & Torres Strait Islander Other	
	origin?  What is your main			
	language?			

# Question 15 - Income

(Please list income from <u>ALL</u> sources and attach supporting documentation)

	Applicant 1		Applicant 2	
	Amount	Source	Amount	Source
Gross Weekly Income (before tax)	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
TOTAL WEEKLY INCOME	\$		\$	

## Question 16 – Value of Assets

(Please list <u>ALL</u> assets, including a description, and attach supporting documentation)

		Applicant 1		Applicant 2	
		Amount	Description	Amount	Description
(i)	Bank Account	\$		\$	
(ii)	Bank Account	\$		\$	
(iii)	Bank Account	\$		\$	
(iv)	Term Deposit	\$		\$	
(v)	Term Deposit	\$		\$	
(vi)	Vehicle(s) Car, Truck, Motorbike, Boat, Caravan etc – Show insured value, make, model, registration	\$		\$	
(vii)	Shares, Stocks, Bonds, Other	\$		\$	
(viii)	Overseas Assets (Specify)	\$		\$	
(ix)	Other (Specify)	\$		\$	
(x)	Other (Specify)	\$		\$	
	Do you own or are you purchasing any residential property or land in Australia?	Valuation		Valuation	
тот	TAL ASSET VALUE	\$		\$	

#### **Question 17 – Household Details**

Show details of everybody else who will be living in the home for which you need the Bond.

Name	Date of Birth	Name	Date of Birth
	//		/
	//		/
	//		/

#### Question 18 - Other Contact

Please give details of a person who is not a member of your household who Housing ACT can contact if we are unable to contact you directly.

Name	
Address	
Telephone	(Home) (Work)
	(Mobile)

### **Question 19 – Property Details**

Have you already chosen a property to rent?	Yes No
If Yes, how much do you want to borrow? (Maximum of 90% of property bond)	\$

#### **Privacy Notice**

Housing and Community Services (HACS) is obliged to handle your information in accordance with the Privacy Principles set out in the Information Privacy Act 2014. We explain how your personal information is collected, used, shared, stored, accessed and corrected in our privacy policy: <a href="http://www.communityservices.act.gov.au/home/full\_privacy\_statement/">http://www.communityservices.act.gov.au/home/full\_privacy\_statement/</a>. The information you provide in this form will be used to assess your bond loan eligibility and for statistical purposes. If you do not consent to supply us with this information we may not be able to assess your bond loan eligibility. HACS will not use or disclose your personal information without your consent, unless required by law, or if you would reasonably expect us to use or disclose the information for a related purpose. If you believe that your personal information has not been handled appropriately, or that we have breached the Privacy Principles you can contact us at <a href="mailto:CSD.Privacy@act.gov.au">CSD.Privacy@act.gov.au</a> or (02) 6207 6547 to lodge a complaint.

#### Declaration

I/we authorise the Commissioner for Social Housing, the Office of Rental Bonds, my/our Lessor/Agent and my/our employer/income provider to exchange information about me/us, my/our tenancy and the bond relating to it. I/we hereby declare that, to the best of my/our knowledge, all questions on this Application have been answered truthfully and correctly and all relevant information has been provided.

	Applicant 1	Applicant 2
Signature(s)		
Date	//	

Completed Applications plus supporting documents should be taken to:

Housing and Community Services Nature Conservation House Corner Benjamin Way and Emu Bank Belconnen ACT 2617

Telephone Enquiries – 13 34 27

Bond Form VER:20161212

#### Office Use Only

## **Document Checklist**

Each applicant must supply 100 points of identity.

Documents	Documents for proof of identification / residency		Points	Applicant 1	Applicant 2
Birth Certificate		70			
Citizenship Certificate		70			
Visa			70		
Passport (cu	irrent or expired less than 3 y	ears)	70		
Rates Notice	9		35		
Bills, eg ele	ctricity, telephone (one per in	stitution only)	25 each		
Credit / Deb	it / ATM Card (one per institu	tion only)	25 each		
Tertiary ID (	Card		40		
Primary/Sed	condary/Tertiary institution re	ecord within last	25		
Secondary/	Tertiary enrolment notice		25		
Electoral Ro	II		25		
Public Servi	ce Employee ID Card		40		
Non Public S	Service Employee ID Card		25		
Other Gover	nment issue ID Card – sealed	in plastic	40		
Government	issue license or permit, eg D	rivers, Shooters	40		
Other licens	e or permit, eg foreign driver	S	25		
Marriage Ce	rtificate		25		
Medicare Card		25			
Registration Certificate, eg car, boat		25			
Centrelink /	Pension Card		40		
Other acceptable document that verifies name and address or signature			25		
TOTAL POIN	TS (minimum 100 points per	oerson)			
Applicant 4 Applicant					
Documents for proof of income / assets				Applicant 1	Applicant 2
Centrelink Inc	ome Statement (if applicable).				
If employed – Employer Income Statement covering previous 26 weeks.					
If self employed – current profit and loss statement and balance certified by a qualified accountant, or most recent tax return.					
Bank books or statements for all accounts.					
Letters or statements from Government agencies (other than Centrelink) from which payment is received.					
Documents for other income or assets (such as share certificates, bond certificates, trust accounts and fixed term deposits, overseas pension or income).					
sby: Officer Name Officer Signature					



# **Employer Income Statement**

Name of Employer	
Name of person giving Statement	
Position in the organisation	
Name of Employee	
Current Address of Employee	
When did the Employee commence work with the organisation?	/
Is the Employee still employed by the organisation?	☐ Yes ☐ No  If no, when did the employee cease employment?
What is the gross amount paid to the Employee in the last 26 weeks?  Include overtime, commission, allowances and penalties.  Note: if the Employee has been employed for less than 26 weeks, please report gross income for the relevant time period.	\$  Over 26 weeks Over shorter period:weeks
What is the current gross weekly amount paid to the Employee? Include overtime, commission, allowances and penalties, if applicable.	\$
Name of person giving statement	
Position in organisation	
Signature	I certify that the details above are true and correct. I understand that Housing and Community Services may contact me to verify these details.
Date	
Telephone	
Email address	
Organisation stamp or seal	



# **Property Details**

(To be completed by Lessor or Agent)

Details of Lessor or Agent			
Name of Lessor / Agency			
Contact Person			
Contact Address			
Telephone			
Facsimile			
Email Address			
Details	of Rental Property		
Address			
Weekly Rent	\$		
Amount of Bond required (Bond only - do not include rent in advance)	\$		
Has the Bond been paid?	☐ Yes ☐ No		
Name/s on Tenancy Agreement			
Has the tenancy commenced?	☐ Yes ☐ No  Date or proposed date of commencement://		
Signature of Lessor / Agent	I certify that the details above are true and correct. I understand that Housing and Community Services may contact me to verify these details.		
Date			