

Recognition as a Tenant Supplement

Use this form to apply for recognition as a tenant or a provisional lease for a public or Aboriginal Housing Office property

What is this form about?

This form is a supplement to the *Application for Housing Assistance*. It asks questions about why you are applying to be recognised as a tenant or need a provisional lease.


Your application will be assessed on the information you provide on these forms and at an interview if you have one.

Please note: before we can consider your request for recognition as a tenant or a provisional lease, the tenant or their estate needs to provide written consent to relinquish their tenancy.

How to fill in this form

To fill in this form:

1. read each question carefully
2. answer all the questions
3. print your answers, using a black or blue pen
4. provide documents that support your application.

The questions that we need evidence for are marked on the form with . Information about the type of evidence we need is in the *Evidence Requirements Information Sheet*. If you did not receive an *Evidence Requirements Information Sheet* with this application, please ask for one from your nearest Housing Pathways social housing provider, or download it from the Housing Pathways website at www.housingpathways.nsw.gov.au.

Please note: before we can assess your request for recognition as a tenant or a provisional lease you need to complete the *Application for Housing Assistance*, as well as provide all the evidence requested.

Help to fill in this form

Contact your local Department of Family and Community Services (FACS) office as soon as possible if you need help with either providing evidence or obtaining consent from the tenant or their estate to give up the tenancy. This will avoid delays that may affect your eligibility for recognition as a tenant or provisional lease.

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.

Where do I lodge this form?

You can lodge this form with any Housing Pathways social housing provider across NSW, either in person or by mail. For a list of their contact details, go to www.housingpathways.nsw.gov.au.

What happens next?

Your application will be assessed and you will be notified of the outcome in writing. You may be contacted if further information about your application is needed.

What if I am homeless?

If you have nowhere safe to stay tonight contact the Link2home service (freecall) 1800 152 152 for assistance with overnight accommodation or visit a Housing Pathways social housing provider.

For more information

For more information about applying for social housing assistance and whether you are eligible, see the Housing Pathways website at www.housingpathways.nsw.gov.au or phone 1800 422 322, 24 hours a day, 7 days a week.

It is illegal for anyone working for FACS 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 benefits of any kind to anyone who works for FACS 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.

Recognition as a Tenant Supplement

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

Your name:

Title
Mr, Mrs, Ms, Miss

Last name
or family name

First and middle name(s)

Date of birth:

PART A - Application for Provisional Lease

R1. What is the name of the tenant and the address of the property?

Title
Mr, Mrs, Ms, Miss

Last name
or family name

First and middle name(s)

Unit/House number Street/Avenue

Town/Suburb Postcode

R2. What is your relationship to the tenant?



Attach proof. See item 27 or 28 on the *Evidence Requirements Information Sheet* for details.

- Spouse or de facto partner
- Formal or informal carer of the children or young persons of the household
- Other

↓ give details

OFFICE
USE
ONLY

T File number

Client reference number

Application reference number

R3. What is the reason for your application?

Mark one only.



Attach documents that support your answer. See item 29 on the *Evidence Requirements Information Sheet* for details.

Tenant moving/moved to nursing home

Tenant moving/moved to institutionalised care

Tenant sentenced or imprisoned for more than 3 months

Tenant has passed away → go to R3b.

Other
give details

R3a. What are the tenant's new contact details?

Unit/House number

Street/Avenue

Town/Suburb

Postcode

Phone

Mobile

Email

R3b. When did, or when will, this change take place?

R4. Are you living in this property now?

If you are not currently living in the property you will need to attach documents that show why you need to live there.

Yes



when did you start living there?
(give approximate date)

No



give details of why you need to live there



See items 27 and 30 on the *Evidence Requirements Information Sheet* for details.

PLEASE NOTE

If you are requesting a provisional lease ONLY, go to question R9 *Appeal Consent* on page 4.
If you are applying for Recognition as a Tenant complete all of Part B.

PART B - Application for Recognition as a Tenant (to remain living in public or Aboriginal Housing Office property)

Complete this section if you are applying for Recognition as a Tenant.

If you are completing only PART A (to notify us of a change in tenancy) and are requesting a provisional lease ONLY, go to question R9 *Appeal Consent* on page 4.

R5. Do you or anyone on this application have any special housing requirements as a result of a medical condition, disability, child custody arrangements or other special circumstances? Yes give details No → go to R6.

(for example, a need for an extra bedroom or a particular location, level access for a wheelchair user or modifications such as a grab rail)

Attach proof. See item 22 on the *Evidence Requirements Information Sheet* for details.

Name of person:

Details of requirements:

Why are the requirements needed?:

R6. Are you, or were you, a carer to the tenant? Yes go to R6a. No → go to R7.

R6a. Did you give up a social housing tenancy in order to live with the tenant? Yes give the address No → go to R6b.

R6b. Have you kept other accommodation that you could live in now? Yes No

R7. Are you the formal or informal carer of the children or young persons of the household, or in the process of applying? Yes go to R7a. No → go to R8.

Attach proof. See item 28 on the *Evidence Requirements Information Sheet* for details.

R7a. Is there any other accommodation available that you could use to provide housing for the children or young persons? Yes give details including any reasons why you can not live in it No → go to R7b.

R7b. Have you tried to find alternative accommodation? Yes give details No → go to R7c.

Attach proof. See item 23 on the *Evidence Requirements Information Sheet* for details.

R7c. Consent regarding formal or informal care of the children or young persons of the household

If you are applying for recognition as a tenant because you are the formal or informal carer of the children or young persons living in the household, you must agree to live in the property to provide care for them for your application to be considered.

If, during the period of a provisional lease, formal or informal care is given to another person, or if your application for recognition as a tenant is unsuccessful, then you must agree to give up the tenancy.

Declaration

- I agree to live in the property to provide care for the children, or young persons living in the household.
- I agree to give up the tenancy if formal or informal care is given to another person during the period of a provisional lease or if my application for recognition as a tenant is unsuccessful.

Full name (please print)

Signature

Date

R8. Agreement to relocate to another property

FACS may ask you to move to another property that better suits your housing requirements as a condition of granting recognition as a tenant.

If you are applying for recognition as a tenant you must sign this declaration for your application to be considered.

Declaration

- I agree that I will move to another property if requested by FACS, as a condition of granting me recognition as a tenant.

Full name (please print)

Signature

Date

R9. Appeal Consent

FACS will advise you in writing if your application for recognition as a tenant is declined. At the same time FACS will advise that you have seven days to provide additional information to support a review of your application. If the decision is still the same after the internal review, FACS will automatically send your file to the Housing Appeals Committee for an independent review of the decision.

Declaration

- I understand that FACS will advise me in writing if my application for recognition as a tenant is declined.
- I understand that if this happens, I will have seven days to provide additional information to support an internal review of the decision by FACS.
- I agree to FACS sending my file to the Housing Appeals Committee for an independent review, if my application is still declined after the internal review by FACS.

Full name (please print)

Signature

Date

R10. FACS Privacy Notice

This privacy notice applies to the Department of Family and Community Services (FACS) which includes the following entities: the Land and Housing Corporation and the Aboriginal Housing Office. FACS 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 FACS 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 FACS as a whole to plan, coordinate and improve the way we provide services. FACS 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.

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. FACS 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 that this information is used by all social housing providers (public, community and Aboriginal housing).
- I understand and agree that FACS may collect information from my former social housing landlord or their agent, including information about any debt.

Title	<input type="text"/>
Mr, Mrs, Ms, Miss	
Last name or family name	<input type="text"/>
First and middle name(s)	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="DD/MM/YYYY"/>

R11. Is there another person helping you to fill out this form?

Yes
that person should
read and sign the
declaration below

No

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.

Title	<input type="text"/>
Mr, Mrs, Ms, Miss	
Last name or family name	<input type="text"/>
First and middle name(s)	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text" value="DD/MM/YYYY"/>
Phone	<input type="text"/>