

## Social Housing Supplement

Use this form to apply for social housing assistance in New South Wales

### What is social housing?

Social housing is secure and affordable rental housing for people on low incomes with housing needs. It includes public housing, Aboriginal housing and community housing.

Social housing assistance in NSW is provided by the Department of Family and Community Services (FACS) and community housing providers, including Aboriginal community housing providers. Most social housing providers participate in Housing Pathways.

Different Housing Pathways social housing providers may have different policies about a range of things, for example bond, length of lease and pets.


### What is this form about?

This form is a supplement to the *Application for Housing Assistance*. It asks questions about the type of housing you and the other people in your household need.

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

### 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. if you need more space, please write on a blank page and attach it to the application
5. 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](http://www.housingpathways.nsw.gov.au).

**Please note:** before your eligibility for social housing can be assessed, you need to complete the *Application for Housing Assistance*, as well as provide all the evidence requested.

### Help to fill in this form

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](http://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](http://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.

## Social Housing Supplement Application for Housing Assistance

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:**

### Provider preference options

**H1. What type of social housing do you prefer?**

Mark one only.

- All available social housing options (this includes public, Aboriginal and community housing managed by any Housing Pathways social housing provider)
- Public housing only (this includes public and Aboriginal housing managed by FACS)
- Community housing only (this includes community and Aboriginal housing managed by any Housing Pathways community housing provider)

**Note:** Housing Pathways social housing providers may use your details from the NSW Housing Register to make you an offer of affordable housing. They may also give your details to another social housing provider so they can make you an offer of social housing. For more information see the *Matching and Offering a Property to a Client Policy* at [www.housingpathways.nsw.gov.au](http://www.housingpathways.nsw.gov.au).

**H1a. Do you wish to be considered for Aboriginal housing?**

Yes  No

**Note:** Aboriginal housing includes properties which are specifically for Aboriginal people and are managed by FACS or community housing providers, including Aboriginal community housing providers.

This question only applies if you or a household member is Aboriginal or Torres Strait Islander.

To apply for Aboriginal housing, Aboriginality needs to be confirmed. See item 3 on the *Evidence Requirements Information Sheet* for details.

OFFICE  
USE  
ONLY

T File number

Client reference number

Application reference number

## About your household

**H2. What is the total weekly rent you and the other people on this application pay now?**

**Note:** Do not include rent paid by people who are not listed on your application form.

Who do you currently rent from? (mark one only)

\$

Private landlord/  
real estate agent

Friend

Relative

Other  
give details

What is your share of the total rent?

\$

**H2a. How many bedrooms do you and other people on this application occupy?**

**H3. Do you or anyone on this application receive either of these Centrelink allowances?**

Mobility Allowance

Carer Allowance

No → Go to H4.



Attach proof. See item 20 on the *Evidence Requirements Information Sheet* for details.

Name of person

Family Name

First Name

**H4. Do you or anyone on this application receive support from a person who is receiving a Centrelink Carer Payment or Carer Allowance?**

Yes  
give details

No → Go to H5.

Name of person receiving support

Family Name

First Name



Attach proof. See item 21 on the *Evidence Requirements Information Sheet* for details.

Name of carer

Family Name

First Name

Contact phone number

## Your housing requirements

**H5. Where would you prefer to live?**

Allocation Zone

**Note:** An allocation zone is a group of areas or towns where social housing is available. Some allocation zones have longer waiting times than others. For more information regarding allocation zones and expected waiting times go to [www.housingpathways.nsw.gov.au](http://www.housingpathways.nsw.gov.au).

**H6. You may be offered a unit in a highrise building. Do you have any of the following reasons why you could NOT live in a highrise unit?**

Medical condition or disability

Child or young person at risk

**Note:** A highrise building has more than seven floors and lift access to all floors. For further information see the *Social Housing Eligibility and Allocations Policy Supplement* at [www.housingpathways.nsw.gov.au](http://www.housingpathways.nsw.gov.au).



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

**H6a. Community housing providers will apply their own allocation policies when identifying a suitable client for an available property. If you want offers of community housing will you accept an offer of a highrise unit?**

Yes

No

**H7. If you are a single person household you may be offered a unit with a combined bedroom and lounge room (studio unit). Do you have any of the following reasons why you could NOT live in a studio unit?**

Medical condition or disability

Require a carer

I am not a single person



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

**H7a. Community housing providers will apply their own allocation policies when identifying a suitable client for an available property. If you want offers of community housing will you accept an offer of a studio unit?**

Yes

No

**H8. 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 H9.

Name of person

Family Name First Name

Details of requirements

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(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.

Why are the requirements needed?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**H9. Do you or anyone on this application have difficulty climbing stairs?**

Yes give details

No → Go to H10.

**Note:** There is a longer waiting time for properties with no steps because of the limited number of these properties.

Name of person

Family Name First Name

Please mark the box with the maximum number of steps this person can cope with

0

1-2

3-5

6 or more



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

**H10. Have you tried to find accommodation that meets your housing needs?**

Yes

No

**H10a. Are there any reasons why you have been unsuccessful or unable to find accommodation?**

Yes give details

No → Go to H11.



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

\_\_\_\_\_

**H11. Do you wish to be considered for a Senior Communities property?**

Yes

No

**Note:** These properties are in complexes that are specifically for older people. To be eligible, you must be either: a single applicant aged 55 years and over, or an Aboriginal and/or Torres Strait Islander aged 45 years and over; or part of a two person adult household where at least one person is 55 years and over or an Aboriginal and/or Torres Strait Islander aged 45 years and over.

## H12. FACS Privacy Notice

This privacy notice applies to the Department of Family and Community Services (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](http://www.facs.nsw.gov.au/site_information/privacy) or by calling: 02 9377 6000 or by emailing: [privacy@facs.nsw.gov.au](mailto: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 that this information is used by all social housing providers (public, community and Aboriginal housing).
- I understand and agree that the Department 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"/>

### H13. 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.

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"/>