

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
<ul style="list-style-type: none"> * You must live, work or be enrolled to study in the ACT. * You must be an Australian citizen, permanent resident or Temporary Protection Visa holder. * You meet the current income limits. * You do not have an interest in a residential property in Australia. * You meet the current cash and asset limit. * You do not have any outstanding debts with Housing ACT. * The rental bond has not been paid. * You are able to satisfactorily meet the obligations and payments required in sustaining a tenancy in a private rental property; * Payment of the rental bond loan is conditional on the applicant(s) entering into a loan repayment agreement with Housing ACT. 	<ul style="list-style-type: none"> * <u>All sections of the Application must be completed, including nil responses.</u> * The Application must be signed by all applicants. * Original documents must be provided to establish identity, residency status, enrolment in a course of study, income and assets. * Your employer and/or Centrelink or other income provider must complete the proof of income forms. * If self-employed, a current profit and loss statement and balance sheet certified by a qualified accountant, or your most recent income tax return must be provided. * Lodging your application in person will assist in an earlier assessment. Alternatively, you may fax or post your application to the address on page 4.

If you have any queries about the eligibility criteria, or about completing the Application Form, please contact Gateway Services, Housing ACT.

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 or audio – please telephone **(02) 6205 0619**.

If English is not your first language and you require the **translating and interpreting services** – please telephone **131 450**.

If you are deaf or hearing impaired and require the **TTY typewriter service** – please telephone **(02) 6205 0888**.

Personal Details

		Applicant 1	Applicant 2
1	Title	Mr Mrs Miss Ms	Mr Mrs Miss Ms
2	Given Name(s)		
	Surname		
3	Former Surname (if applicable)		
4	Date of Birth/...../...../...../.....
5	Relationship to other Applicant (eg partner)		
6	Are you a citizen or permanent resident of Australia? If No, what is your residency status?	<input type="checkbox"/> Yes <input type="checkbox"/> No Status	<input type="checkbox"/> Yes <input type="checkbox"/> No Status
7	Current residential address		
8	Postal Address (if different from residential)		
9	Telephone Number	(h) (w) (mobile)	(h) (w) (mobile)
10	Email Address		
11	Do you live or work or are you enrolled to study in the ACT?	Live <input type="checkbox"/> Yes <input type="checkbox"/> No Work <input type="checkbox"/> Yes <input type="checkbox"/> No Study <input type="checkbox"/> Yes <input type="checkbox"/> No	Live <input type="checkbox"/> Yes <input type="checkbox"/> No Work <input type="checkbox"/> Yes <input type="checkbox"/> No Study <input type="checkbox"/> Yes <input type="checkbox"/> No
12	Have you received any assistance from Housing ACT?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Bond Loan or Rented Property? (please circle) Account Number Address	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Bond Loan or Rented Property? (please circle) Account Number Address
13	Do you owe any money to Housing ACT?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

All parts of the following Question 14 are Optional

14	Indigenous Status (statistical purposes only)	<input type="checkbox"/> Non-Indigenous <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Island	<input type="checkbox"/> Non-Indigenous <input type="checkbox"/> Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal and Torres Strait Island
	What is your Country of origin?		
	What is your main language?		

15 Income

(Please list income from ALL sources and attach supporting documentation)

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

16 Value of Assets

(Please list ALL 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 Investments	\$		\$	
(viii)	Overseas Assets (Specify)	\$		\$	
(ix)	Other (Specify)	\$		\$	
(x)	Other (Specify)	\$		\$	
	Do you own or are you purchasing any residential property or land in Australia?	<input type="checkbox"/> Yes <input type="checkbox"/> No Address Valuation \$		<input type="checkbox"/> Yes <input type="checkbox"/> No Address Valuation \$	
TOTAL ASSET VALUE		\$		\$	

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
/..../....	/..../....
/..../....	/..../....
/..../....	/..../....

18 Other Contact

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

Name	
Address	
Telephone (h) (w) (mobile)

19 Property Details

Have you already chosen a property to rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, how much do you want to borrow? (Maximum of 90% of property bond)	\$

About the information you give.

Unless otherwise specified as optional, the personal information sought on this form is required under the Housing Assistance Act 2007.

The information will be treated confidentially, and will be used to assess your eligibility for housing assistance, revenue collection, and for statistical purposes, and may be disclosed where required or authorised by or under law.

You may have access to the information at any time to ensure that it is still accurate, and correct it if necessary.

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 submitted to:

Gateway Services
Nature Conservation House
Corner Benjamin Way and Emu Bank
Belconnen ACT 2617
Telephone Enquiries – (02) 133 427 Facsimile – (02) 6207 1148

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Document Checklist

Each applicant must supply 100 points of identity.

Documents for proof of identification / residency	Points	Applicant 1	Applicant 2
Birth Certificate	70		
Citizenship Certificate	70		
Visa	70		
Passport (current or expired less than 3 years, not cancelled)	70		
Rates Notice	35		
Bills, eg electricity, telephone (one per institution only)	25 each		
Credit / Debit / ATM Card (one per institution only)	25 each		
Tertiary ID Card	40		
Primary/Secondary/Tertiary institution record within last 10 years	25		
Secondary/Tertiary enrolment notice	25		
Electoral Roll	25		
Public Service Employee ID Card	40		
Non Public Service Employee ID Card	25		
Other Government issue ID Card – sealed in plastic	40		
Government issue license or permit, eg Drivers, Shooter	40		
Other license or permit, eg foreign drivers	25		
Marriage Certificate	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 points scored (minimum 100 points per person)			
Documents for proof of income / assets		Applicant 1	Applicant 2
Centrelink Income Statement (if applicable).		<input type="checkbox"/>	<input type="checkbox"/>
If employed – Employer Income Statement covering previous 26 weeks.		<input type="checkbox"/>	<input type="checkbox"/>
If self employed – current profit and loss statement and balance certified by a qualified accountant, or most recent tax return.		<input type="checkbox"/>	<input type="checkbox"/>
Bank books or statements for all accounts.		<input type="checkbox"/>	<input type="checkbox"/>
Letters or statements from Government agencies (other than Centrelink) from which payment is received.		<input type="checkbox"/>	<input type="checkbox"/>
Documents for other income or assets (such as share certificates, bond certificates, trust accounts and fixed term deposits, overseas pension or income).		<input type="checkbox"/>	<input type="checkbox"/>
Completed by:	Officer Name	Officer Signature	
	/...../.....	

Employer Income Statement

Name of Employer	
Address of Employer	
Name of Employee	
Current Address of Employee	
When did the Employee commence work with the organisation?/...../.....
Is the Employee still employed by the organisation?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, when did the employee leave the organisation? <div style="text-align: center; padding: 5px;">...../...../.....</div>
What is the gross amount paid to the Employee in the last 26 weeks? (including overtime, commission, allowances and penalties). If the Employee has been employed for less than 26 weeks, the amount paid during that period.	\$
What is the current gross weekly amount paid to the Employee? (including 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 ACT 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name/s on Tenancy Agreement
Has the tenancy commenced?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 ACT may contact me to verify these details.
Date/...../.....