This form is to be completed by Customer applying for additional people to their household.

Please include the details of each new additional occupant to be housed with you. Attach proof of identity for each additional occupant in your household. You will also need to attach Proof of Citizenship, Residency or Visa Category, property ownership, income and assets for each additional person 18 years old or over. See the Factsheet - Evidence Requirements for more information.

If you need more information or assistance completing this form, please contact Hume Community Housing Association Co Ltd ('Hume Community Housing'), Customer Service, 02 9777 4300 to book an appoint with your Neighbourhood Officer/ Support Coordinator or come into one of our offices.

Please mark relevant boxes with a | If you need more room to answer any questions, please include details on a separate page and attach it to this form. **Customer Information** Customer last name or family name: Given name(s): Tenancy Address: Phone: Mobile: Additional occupant information Full Name Proposed Title Sex Date of Relationship Customer date when (include: first, middle (Mr, Mrs, M/F Birth to you Reference and family names) Miss, Ms) Number moving into (CRN) (if property applicable) Country of Birth Is the additional occupants born in Australia? ☐ Yes □ No If no, please completed table below Name of Additional Occupant Country of Birth Main language Australian spoken at home Citizen Y/N

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Non-Australian citizer	1					
For each additional c their Visa Sub-class		rho is not an Australian c	itizen,	what is thei	r residency	status and
Name of Additional (	Occupant	Residency status (e.g sponsored migrant, New Zealand Special Category Visa, refugee		Visa sul num		Date of arrival
Additional occupant'	s current h	nousing situation				
Do any additional oc	cupants liv	e at your property now	?		Yes	□No
Name of Addit Occupant	tional	Living with you now What date did they move in?			iving with y s the curre	you now nt address?
Additional occupant'	<b>s</b> housing l	nistory				
Do any additional occ	cupants ha	ive a current application	for so	cial housing	? Yes	□No
Name of Additi Occupant	onal	Customer Code or Pro Code	perty	Hou If no, th s h ould p	sing regist ne additiona provide a wi	on the NSW er? (Y/N) al occupant ritten request m the register
				□Yes	□No	
				□Yes	□No	
				□Yes □Yes	□No □No	
				□Yes		
Are any of the addition customer of Hume of		ants a current customer NSW?	, an ac			former
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T.V Consultation Required

Approved by:

No

COO

Aboriginal or Torres	Strait Islander (	Drigin					
Are you, or the addi If not already provide							ence Requirements
Name of Additional Occupant	Abo	original		es Strai lander	t	То	original and rres Strait Islander
Disability/ongoing m	nedical conditior	)					
Do you or anyone or Attach proof of disab				_	_		
Name of the person	n with the disabil	ity or medica	l condit	ion	Disabil	ity or medi	cal condition
Support arrangemen	nts						
Do you or a person or a person/individent Requirements							
Name of person re	ceiving support	Name of orç or program supp (if relev	providir ort		Jame of s orker or individ	person/	Contact phone number
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## Customer's permission and declaration

I give my permission for the additional occupant listed in this application to be housed with me, if Hume Community Housing approves this application. I understand that this application does not in any way make the additional occupants eligible for separate accommodation in their own right. I acknowledge that the rent for the property will be reassessed and may increase due to the inclusion of an additional occupant.

I state that the information contained herein is true and correct in every way.

Customer <b>or Guardian's</b> name- delete as appropriate (please print):	Customer <b>or Guardian's</b> signature - delete as appropriate:	Date:
Customer <b>or Guardian's</b> name- delete as appropriate (please print):	Customer or Guardian's signature - delete as appropriate:	Date:

## **Additional Occupant's Notice and Consent**

Under the *Privacy and Personal Information and Protection Act 1998,* and the *Health Records and Information Privacy Act 2002,* you must be told why your personal information (including health information) is being collected, how it will be used and whether it will be given or exchanged with another party.

All personal information collected by Hume Community Housing under this Form is collected in accordance with its Privacy Policy, a copy of which can be downloaded from <a href="https://www.humehousing.com.au/privacy.html">https://www.humehousing.com.au/privacy.html</a> or obtained from Hume Community Housing's Offices.

## Notice

This application collects personal information about additional occupants for the purpose of Hume Community Housing processing and assessing requests by Customers to house additional occupants in their premises.

## Consent

Each additional occupant on the application aged 18 years or over must provide their written permission for their personal information to be collected by the customer.

I give my permission for my personal information in this form to be collected by the customer for the provision of Hume Community Housing.

Additional Occupant name (please print):	Signature:	Date:

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****For office use only****	
THE FORM IS RECEIVED BY:	
Officer Name:	Position:
Signature:	Date:
THE FORM IS ASSESSED BY:	
Application approved	☐ Yes ☐ No Note: Please follow below steps for Yes and No
Reason for refusal:	
Authorising Officer Name:	Position:
Signature:	Date:
<ul> <li>Yes:</li> <li>Issue approval letter to the customer</li> <li>Issue approval letter to the additional occupant</li> <li>Issue Rent Subsidy Application form to the customer</li> </ul>	No:  Issue declined letter to the customer  If the additional occupant is already living in the dwelling advise customer that the occupant must vacate
SDM updated	Rent subsidy updated

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