

Application No.

*Transfer application
pursuant to the Housing Act 2003.*

Transfer Application

Social housing transfers are available to help Queenslanders with their housing needs. This application collects essential information to assess your eligibility for a transfer to alternative social housing. Submission of this application does not guarantee an offer for transfer.



Important information

Your eligibility for a transfer will be assessed based on the information and the supporting documentation you provide with this application. If your circumstances change at any time, please advise your local Housing Service Centre within 28 days of the changes.



Completing this application – have you:

- Answered all the questions with a tick where there are Yes/No boxes?
- Collected supporting evidence including proof of income and assets for new household member/s in this application?
- Read and signed the declaration and consent on the last page?
- Had this application signed by a witness on the last page?
A Housing Service Centre officer can witness this application if you are submitting it in person.
- Got identification ready for any new household member/s for when you submit this application?
Alternatively, you can attach witnessed copies of identification evidence if you are returning this application via post.



For more information on housing assistance, please call or visit your local Housing Service Centre. You can also find information at www.qld.gov.au/housing or download our 'Housing Assist Qld' mobile app from the Google Play, Microsoft or Apple App stores.

We can also help you to find a place to rent in Queensland using RentConnect or help you with a bond loan to cover the rental bond when you move into private rental accommodation. For more information, call or visit your local Housing Service Centre or visit www.qld.gov.au/housing.

For office use only

This application is not required to be completed if the transfer is due to portfolio management reasons.

Application Assistance

What is your first spoken language?

Do you need an interpreter? If you speak in a language other than English, or have hearing difficulties, we can arrange for an interpreter to assist you.

Which interpreter do you require? Language, provide details:

Signing

Do you need assistance when making decisions?

Yes No

This may be a person that helps you to make decisions, or someone who makes decisions on your behalf about your personal, lifestyle or financial matters.

If yes, which of the following:

Public Trustee

Family, Friend or Advocate

Office of the Public Guardian

Power of Attorney

Other, provide details:

Tenant Details

Full name/s:

Address:

Telephone:

Home:

Mobile:

Work:

Email:

Tenancy reference number:

Centrelink reference number (CRN):

Type of transfer:

Social Housing

Mutual exchange

(swapping a public housing property with another public housing tenant – eligibility criteria apply)

Reason for transfer:

Who are your current household members and what are their dates of birth?

Attach information on a separate page if needed.

Will everybody listed on your current tenancy agreement be transferring with you?

Yes

No

If no, who will not transfer to the new tenancy?

Note: No people can remain at the property once the transfer is complete.

Is any household member expecting a child?

Yes

No

If yes, expected due date:

What type of transport do you use?

Public

Own

Other (family and friends)

Your need to move

Does your household need to move for any of the following reasons?

Tick all that apply.

- | | | |
|--|---|---|
| <input type="checkbox"/> You are experiencing domestic and family violence | <input type="checkbox"/> The safety of a child in your care is at risk | <input type="checkbox"/> You have a history of homelessness |
| <input type="checkbox"/> You are experiencing safety concerns related to violence, stalking, abuse (physical, emotional, financial), or harassment (other than domestic, family or sexual violence) from another person in your household or community | <input type="checkbox"/> You are experiencing a family or relationship breakdown | <input type="checkbox"/> Your housing has been impacted by a natural disaster |
| | <input type="checkbox"/> You are experiencing sexual violence (outside of domestic and family violence) | |
| | <input type="checkbox"/> You need to meet your or a household member's disability support needs | <input type="checkbox"/> You are a victim of a major crime that was committed in Queensland |

Is your current housing location unsuitable for any of the following reasons?

Tick all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Too close in proximity to the perpetrator of domestic, family, or sexual violence against you | <input type="checkbox"/> Distance does not allow you to accept a firm offer of employment – minimum 20 hours per week | <input type="checkbox"/> Does not enable you to gain or maintain regular access or custody to shared care of children |
| <input type="checkbox"/> Does not meet the conditions of a Court Order, Parole or Probation Order, Family Court Order, Domestic Violence Order, Child Protection Order | <input type="checkbox"/> Too far away from frequently required essential services – transport, medical, disability support for daily activities, transport to meet mobility requirements | <input type="checkbox"/> You wish to enable family reunification |
| <input type="checkbox"/> Too far away from family and community support which impacts on the wellbeing of the household | <input type="checkbox"/> Too far away from education or training services | <input type="checkbox"/> You are an Aboriginal or Torres Strait Islander person and need to move for cultural reasons |

Is your current housing unsuitable for any of the following reasons?

Tick all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Design restricts daily living activities – bathing, mobility, or seriously aggravates a medical condition or disability | <input type="checkbox"/> Size is too small resulting in overcrowding |
|--|--|

Your financial wellbeing

Are you or another tenant experiencing any of the following situations?

Tick all that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> Unable to work and have high levels of living expenses beyond normal living costs related to a long-term or serious medical condition or permanent and/or significant disability | <input type="checkbox"/> Multiple periods of unemployment | <input type="checkbox"/> Currently employed – |
| | <input type="checkbox"/> Long-term unemployment | <input type="checkbox"/> Part-time |
| | | <input type="checkbox"/> Full-time |
| | | <input type="checkbox"/> Casual |

Your wellbeing

Have any of the following affected you or your household's ability to access stable housing?

Tick all that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> You or a household member have a permanent and significant disability | <input type="checkbox"/> You are experiencing safety concerns related to risk of violence, stalking, abuse, or harassment (other than domestic, family or sexual violence) from another person in your household or community | <input type="checkbox"/> There are a limited number of or no suitable properties to meet needs - size, location or features |
| <input type="checkbox"/> You or a household member have a long-term or serious medical condition | <input type="checkbox"/> You are a young person at risk who requires a tailored response on your path to independence | <input type="checkbox"/> Your safety is at risk from domestic, family, or sexual violence |
| <input type="checkbox"/> There is an immediate and ongoing risk to the safety of a child in your care | | <input type="checkbox"/> History of homelessness |

Your future housing

Where do you want to live?

You may be offered housing from any of the areas listed below.

Area 1: <input type="text"/>	Area 4: <input type="text"/>
Area 2: <input type="text"/>	Area 5: <input type="text"/>
Area 3: <input type="text"/>	Area 6: <input type="text"/>

What types of housing do you want to apply for?

More than one housing type can be applied for. We will make every effort to offer the type of housing that you have chosen and are eligible for. However, this cannot be guaranteed. Housing with four or more bedrooms are limited.

- | | |
|---|---|
| <input type="checkbox"/> Townhouses have three or more units next to each other with one to four bedrooms each, divided by common walls. These can be single or double storey and usually have small fenced yards. | <input type="checkbox"/> Cluster housing is several separate homes with two to four bedrooms each, located within a housing development. |
| <input type="checkbox"/> Apartments/flats/units are usually a complex of two or more storeys, may be studio style or have up to three bedrooms. These do not have a separate yard. | <input type="checkbox"/> Seniors' units are only available to applicants over 55 years of age and are usually in a complex of one or two storeys with one to two bedrooms. |
| <input type="checkbox"/> Detached houses are one house with two or more bedrooms on its own block of land. | <input type="checkbox"/> Dual Occupancy are two detached houses that are on one block of land, sometimes with a shared driveway. |
| <input type="checkbox"/> Duplexes are usually two units with one to three bedrooms, each on a block of land, divided by a common wall. These may be in groups of two to four. | |

Do you need modifications to your home to help with daily living activities due to a disability or medical condition?

Yes No

If yes, provide details:

Will you accept housing with shared facilities?

Yes No

Living, bathroom or kitchen facilities may be shared. If you accept an offer, you can choose to remain on the housing register for housing which has its own facilities.

Do you have any pets?

Yes No

If yes, provide details:

Is there any additional information you would like to provide?

Attach a page if necessary.

New household member details

Note: If more than four new household members, complete and attach 'Additional household member' forms before submitting this application.

What is your relationship with the tenant/s?

Full name:

Alias:

Any other name you may be known as.

Gender: Date of birth: Country of birth:

Do you identify as: Aboriginal Australian South Sea Islander
Tick all that apply. Torres Strait Islander Other cultural or linguistic background None

Centrelink reference number (CRN):

Department of Veteran Affairs reference number (DVA):

Citizenship/Residency details: Australian citizen Permanent resident
 Not permanent resident Visa - what type?

Are you expecting a child? Yes No
 If yes, expected due date:

Do you have a medical condition or disability? Yes No
 If yes, provide details:

Attach information on a separate page if needed.

What is your income?
Gross amount and type (wages, pension, allowances, family payments, interest, superannuation).

\$ Frequency: Type:
 \$ Frequency: Type:

What are your assets?
Savings, investments, cash deposits, property trusts, shares, bonds, debentures, superannuation - allocated pension or lump sum payments, share from property sale or settlement.

\$ Type:
 \$ Type:

Do you own/part own property in Australia or overseas? Yes No
This includes residential property, vacant land, industrial property, commercial property, a live-aboard boat, cabin, donga, caravan, or manufactured/ transportable home.

If yes, what type:
 Address:
 % of property owned:
 Current property value:
 Ownership date:

What type of transport do you use? Public Own Other (family and friends)

Evidence for your application

All evidence to support your application must be provided before an assessment can be completed.

Please attach evidence about your need to move and your housing needs:

- Documentation supporting your reasons for needing to move
- For anyone who has a medical condition or disability – completed 'Medical Report' form (PH068) (unless we already have this information)
- A completed 'Support Statement' form (PH076)
- Decision-making – Public Trustee, Guardian, Power of Attorney documentation (unless we already have this)

Some income, medical and referral forms are available at www.qld.gov.au/housing. Or please call or visit your local Housing Service Centre for forms or advice.

Attach information about any new household members living with you

What identification evidence can the new household member/s provide?

All evidence to support your application must be provided before it can be completely assessed. Please tick all that apply.

Primary	Secondary
<input type="checkbox"/> Australian Birth Certificate or extract	<input type="checkbox"/> Bank, credit or ATM card with your signature
<input type="checkbox"/> Australian Naturalisation or Citizenship Certificate	<input type="checkbox"/> Bank, credit union or building society statements
<input type="checkbox"/> Australian Permanent Residency Certificate or stamp	<input type="checkbox"/> Centrelink correspondence with CRN
<input type="checkbox"/> Immicard, Immigration or sponsorship papers	<input type="checkbox"/> Medicare Card
<input type="checkbox"/> Temporary Protection Visa or stamp	<input type="checkbox"/> Health Care Card
<input type="checkbox"/> Australian Passport	<input type="checkbox"/> Seniors/Pensioner Card
<input type="checkbox"/> Australian Driver licence	<input type="checkbox"/> Taxation Assessment Notice
<input type="checkbox"/> Photograph identification card (Queensland Transport)	<input type="checkbox"/> Australian Marriage Certificate
<input type="checkbox"/> Adult Proof of Age Card until expiry (Queensland Transport)	<input type="checkbox"/> Australian divorce papers
<input type="checkbox"/> 18+ card until expiry (Queensland Transport)	<input type="checkbox"/> Life Insurance policies
<input type="checkbox"/> Keypass Card	<input type="checkbox"/> Other photographic identification such as security identification, cash converters card
<input type="checkbox"/> Queensland Corrective Services verification	

Further evidence required

Below are examples of other types of evidence new household members will need to provide, where applicable. Existing household members must also provide up-to-date income, assets and property ownership evidence as detailed below.

- **Income** – Centrelink income statements, payslips, employer's declaration/s
Household members over 16 years receiving Centrelink payments can give consent to the department to obtain income and assets details electronically from Centrelink.
- **Assets** – quarterly bank statements and documentation showing details of other assets and their current valuation
- **Property ownership** – title deed, mortgage documents, contract of sale

Declaration and consent

Personal Information Privacy Notice

The Department of Communities, Housing and Digital Economy is collecting personal information on this form to provide you with housing assistance or assess grant funding applications. This is authorised by the *Housing Act 2003*. To assist you with your housing needs and services, relevant personal information may, in very limited and specific circumstances, be disclosed to partner agencies, service providers, agencies authorised by legislative provisions, and local governments and non-governmental agencies that now, or will provide you with housing and/or support services. Limited personal information may be used for housing related research, policy or planning functions. Unless authorised or required by law, your personal information will not be passed on to any other third party without your consent. More information about the department's privacy policy is available on our website at www.chde.qld.gov.au.

I understand:

- the instructions given on this form and agree to the above Privacy Notice above
- the information on this form will be used by the Department of Communities, Housing and Digital Economy to register my application for a transfer, providing I am eligible
- my personal information may be given to government and non-government organisations to provide me with housing and/or support services
- that as tenant/s, I must advise the department if any circumstances change regarding current or new household members
- that I may become ineligible for housing assistance if changes occur to my or my household's circumstances, incomes and/or assets
- upon submitting this application, each new household member/s must provide at least one item from the above list of primary and secondary identification as proof of identity. One proof of identity, must show a Queensland address, signature and date of birth.

To the best of my knowledge, the information provided on and in conjunction with this application is true and correct. I understand that I will commit an offence and be liable to a penalty under the *Housing Act 2003* if I knowingly provide to the Department of Communities, Housing and Digital Economy false or misleading information that may influence decisions about my eligibility for housing assistance and may make my application invalid.

<p>Applicant name: <input type="text"/></p> <p>Signed: <input type="text"/></p> <p>Date: <input type="text"/></p>	<p>Applicant name: <input type="text"/></p> <p>Signed: <input type="text"/></p> <p>Date: <input type="text"/></p>
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I am a Department of Communities, Housing and Digital Economy employee / registered community housing provider employee / Corrective Services officer / Justice of the Peace / Commissioner for Declarations / Solicitor.

I have witnessed the above signatures and sighted two of the listed forms of identification for each applicant.

<p>Witness name: <input type="text"/></p> <p>Signed: <input type="text"/></p>	<p>Position: <input type="text"/></p> <p>Organisation: <input type="text"/></p>
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