Application for Concessions



Department for Communities and Social Inclusion

Use this form to apply for a concession on your household water and sewerage rates and/or an energy concession if you hold a card issued by Centrelink or the Department of Veterans' Affairs OR apply using the online application form at www.sa.gov.au/concessions. To apply for a concession on your Emergency Services Levy, use Form No APC F008. If you reside in a Residential Park and wish to apply for a Concession, use Form APC F019.

Please enter your personal details as they appear on your Centrelink or Veterans' Affairs Card.

About You (the Applicant) **Section A:**

Title	Surn	ame					Date	of Birth
Given Names								
Residential Address	Number	Street Name	(onter exact)	u as it appears a		urb / Town	airs Card)	Postcode
			(enter exacti	y as it appears o	n your Centre	link or Veterans' Aff	alis Caluj	
Postal Address (if different to above)								
Telephone	Home				Mobile	e		
Email Address								
Preferred Conta	act Met	hod	Email	Post	Mobile	Phone		
Partnership Sta	tus	Single	Married	Domestic F	Partner ^a	Widowed	Divorced	Separated
Are you (do you	u identif	fy as) Abori	ginal or Torre	s Strait Islaı	nder?		Yes	No

Section B: Your Living Arrangements

Q1	Is the above residential address your principal place of residence?	Yes No
Q2	When did you first occupy the property? (or approximate date, if more than 2 years ago)	
Q3	Do you own or part-own the property you are living in?	Yes No
Q4	Do you rent the above address? (ie through a tenancy agreement or lease arrangements)	Yes No
Q5	Is there anyone living at the above address who is not your spouse, domestic partner ^a or dependant ^b ?	Yes - (Proceed to Q6) No - (Proceed to Q8)
Q6	If YES to question 5, do they receive a benefit or pension from Centrelink or the Department of Veterans' Affairs (DVA)?	Yes - (Proceed to Q8) NO - (Proceed to Q7)
Q7	If NO to question 6, does this person have an income of \$3000 or more per year?	Yes No

	Customer ID:			
	Property ID:			
OFFICE USE ONLY	Valuation Number:			
Housing SA	Centrelink validation undertaken	Yes	No	// DD / MM / YYYY
	Land Services Group validation undertaken	Yes	No	

Q	a private if you ar	e not a ho tenant, j e a reside	please ir	ndicate		A Housing SA property		retire	proved resident-i ment complex – i ement Villages Ac	under the
	the follo (with a cro	wing: oss in the re	elevant bo	ix)		A community housing asso property	ociation		stered housing erative	
					(Other - please specify:				
Q						ng association or retin omplex where you liv				
Q1	L O Do you h	nave a ho	me renta	al-purch	ase agre	ement with Housing	g SA¢?		Yes	No
a b	as close cor 'Dependants college or u	npanions o s' includes o niversity, ar	r life partr children u nd childrei	ners. nder the a n betweer	age of 16 y n 16-18 ye	ationships, same sex de rears and full-time stude ars in receipt of Youth A	ents betwee llowance, Si	n 16-24 ckness A	years who atten Ilowance or Spe	d school, cial Benefit.
C	Rental Purch Purchase Ag					nt towards the ownersh ng SA.	ip of the ho	use you	occupy. The Re	ntal
Se	ection C:	Your Ir	ncome	Details						
Q1				a payme	nt from	Centrelink or the De	partment	of	Yes - (P	roceed to Q12)
	Veterans	' Affairs (DVA)?						No - (Pr	oceed to Q14)
Q1	2 If YES to	Q11, wha	at type c	of Centre	elink or D	VA payment do you	receive?	Ind	icate (tick) your	card type:
						Carer payment, Civilian W ing Payment Single, Wido			nsioner Conce	
	Pension, W Allowance Incentive S	/ife Pension , Communit cheme (NE	, NZ or Bri y Develop IS), Mature	tish War V ment Emp e Age Allov	Vidow's Pe ployment P wance, Nev	nsion, ABSTUDY, Austudy roject (CDEP), New Enter wstart, Partner Allowance	, Youth prise e, Parenting	De Aff	ntrelink Healt partment of \ airs Gold Carc	/eterans'
	•					v Allowance, Bereavemer		•		
	Widow) or	a DVA Gold	l Repatriat	ion Health	Card issue	iation Health Card (EDA, ed to a person with 80 or	more overal	I		
	impairmer	it points un	der the <i>Mi</i>	litary Reho	abilitation	and Compensation Act 20	004.	Ins	ert your paymer	nt type
Q1	3 Please e	nter your er Referer				trelink		Car	rd start date or o	late of grant
	OR				•)				DMMY	
		' Affairs r er on Gold						(no	(as shown on yo ot applicable for	
Q1	L 4 Do you h	old a Cor	nmonw	ealth Se	niors He	alth Card?	Yes If y	es, ter the		
						alth Seniors Health vith your application.	No car dat	d start	(as shown on	your card)
Q1	L 5 Do you h	old a Cor	nmonw	ealth Lo	w Incom	e Health Care Card?				
Please note: If you are the holder of a Low Income Health Care Card you No card start Sta								Start o	late	
	the bottor	n of your h	ealth care	e card is th	ie card sta	application. Located at rt date. Please tick a box		te and d date		
		ch matche							End d (as shown on	
	LI SL	YA WA	NS BVA	PA FFR	PP DR	SA MAA			(as 5110W11 011	your caru)
	51	•••			- · · ·					

Note: If you meet low income provisions, you and your spouse/domestic partner (if applicable) may be eligible for some concessions, even if you do not receive an eligible Centrelink payment and do not hold a Commonwealth Seniors Health Card or Low Income Health Care Card. If you think you might qualify as a low income applicant, please telephone the Concessions Hotline on 1800 307 758.

Section D: Information required for Energy concession.

Q16	such as AGL, C	n electricity account Drigin or Simply Energ ne name on your Centreli	gy? (The name on your				2S - (Proceed O - (Proceed	
Q17		S to Q16, is there an electricity meter in your home, i.e. is your home Yes - (Proceed to Q18) vidually metered for electricity use? No - (Proceed to Q22)						
Q18	If YES to Q17, your electricity	what is the account r y bill?	number shown on					
Q19	What is the na e.g. AGL, Origin, S	ame of your electricit Simply Energy	y retailer?					
Q20		lling Period shown or lectricity account?	n your D D		y y to	D D		
Q21		National Metering Ide ar electricity account)	entifier (NMI)?				(Proceed to S	Section E)
Q22	Do you receive from the oper complex in wh	e a bill for your energ ator of the retiremen iich you live?	it village or	Yes (Attach a co received fro No (<i>Proceed to</i>	om the oper		electricity bill eed to Sectic	
Q23		how do you pay for y nvoices and/or receipts fo		l	Use LPG	e own ene	ergy ecify belo	w
	•	nge your energy retailer o ine on 1800 307 758.	or address please conta		r		,	
C	tion Tr. Jufe		former					
Sec	lf you this s	ormation required are not currently receivi ection. : If you are a tenant of a p	ng water or sewerage of	concessions and	think you	may be eli		e complete
024		e an account from SA		•			es - (Proceed	d to ()25)
~ <u> </u>	bo you receive						0 - (Proceed	
Q25	(as appears in the	what is your SA Wate e top right hand corner o /aluer-General numb	f the account)					
Q26	When did you	purchase the proper nore than 2 years ago, th	ty to which that ac	count relates	?			
Q27	Does your cou effluent from	ncil rates notice inclu your property? (ie cha nagement Scheme)	ude a charge to rem				Yes	No
Q28	If you share ov listed on your	wnership of your hon rental agreement (ind	ne with others, or if cluding your spouse/do	you are rent mestic partner)	ing and t , please _l	there are provide tl	other ter heir detai	ants Is below:
	Surname	Given Names	Their relationship to yo (the applicant)	u Their date/s of (if known	inte	Their % erest in the property		e with you in property?
						%	Yes	No
						%	Yes	No
						%	Yes	No
						%	Yes	No
Q29		ing your accommoda water usage to you			?	agreemer	copy of your n nt/lease) (Pro	
) (Proceed to	0 (030)	

Yes (Attach a copy of your most recent water bill) (*Proceed to Section F*)

authorise:

NO (Proceed to Q31)

Q31 If none of Section E applies to you, how are you billed for your water usage? (Provide evidence if possible. If you are unable to provide evidence, please call the Concessions Hotline for assistance on 1800 307 758)

Section F: Authority and declaration (please ensure you fully complete this section)

L

(write applicant's full name)

The Department for Communities and Social Inclusion (DCSI), to use Centrelink Confirmation eServices to perform a Centrelink or Department of Veterans' Affairs (DVA) enquiry of my Centrelink Customer details and concession card status in order to determine if I qualify for a concession, remission, rebate or service. I authorise DCSI and the providers of the relevant services, both past and present, to exchange information required for this purpose. I authorise the Australian Government Department of Human Services to provide the results of that enquiry to DCSI.

I understand that:

- The Department of Human Services will use information I have provided to DCSI to confirm my eligibility for concessions, remissions, rebates or services and will disclose to DCSI my personal information, including my name, address, concession card status, payment type and payment status.
- This consent, once signed, remains valid while I am a customer of DCSI unless I withdraw it by contacting DCSI or the Department of Human Services.
- I can obtain proof of my circumstances/details from the Department of Human Services and provide it to DCSI so that my eligibility for relevant concessions, remissions, rebates or services can be determined.
- If I withdraw my consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the concession, remission, rebate or services provided by DCSI and providers of relevant services.

Your signature:

Date:					

In order to assess and confirm my eligibility for the concession I have applied for, I authorise DCSI and the providers of the relevant services, both past and present, to exchange information required for this purpose.

Your signature:

I declare the following:

- All details provided by me on this form are true and correct.
- I will notify DCSI immediately if the information I have provided in this application for concessions changes OR to revoke this authority.

Date:

Date:

• I understand that it is an offence pursuant to Section 250 of the *Family and Community Services Act 1972* to obtain or attempt to obtain a concession by means of false pretence and that such an offence carries a fine or term of imprisonment.

Your signature:

NOTE if you: • are a private tenant you will need to provide the • live in an approved resident-funded retirement complex following documents to support are generating your own energy your application Live in a residential complex **Private Tenant** Generating your own energy A copy of your rental agreement (stating A copy of an electricity account showing Copies of receipts for ongoing energy that you are responsible for the full your name and a copy of your most costs such as LPG gas receipts. cost of water usage) and copies of your recent water bill if you are charged for water bills provided by your landlord. your water.

Please note: If you are the holder of a Commonwealth Seniors Health Card or a Low Income Health Care Card you will need to send in a copy of your card with your application.

(Please send scanned copies by post or email to us, along with your completed application form)

Submit your application:

By post to	Concessions	Online	At www.sa.gov.au/concessions (using the online form)
	Reply Paid 292 Adelaide SA 5001 (no postage stamp required)	By email	concessions@sa.gov.au

For assistance or further information:

Telephone	The Concessions Hotline on 1800 307 758 If you have a hearing or speech impairment, please use our text telephone service on TTY: (08) 8226 6789
Email	concessions@sa.gov.au
Internet	www.sa.gov.au/concessions