



Employer's declaration form

Section A - tenant/applicant/household member to complete

Rental application/agreement number:

Name:

Address:

Section B – your employer/s to complete this section to supply evidence of your income

Name of employer (or company name/stamp)

Occupation of the person named in section A

Permanent Temporary Casual Fulltime Part-time *School year only

*If school year only, is the employee paid during the school holidays? Yes No

Date employment began: / /

Date ceased (if applicable) / /

Income received – fulltime and permanent part-time employees only

Gross weekly wage/salary * \$

Employee has been receiving this rate of pay since (date): / /

*Total gross weekly wages includes income which is salary sacrificed; paid as a fringe benefit; and, wages paid while the employee is on leave. Please DO NOT include 'other' income types listed below.

Income received – casual / part-time employees only

Total gross casual earnings for last four weeks (or less if employed less than 4wks) \$

Please do not include other income e.g. overtime, bonuses, allowances, etc, (see 'other income' below)

Other income (not included in gross wage above)	Total for last four weeks
Commission/s	\$ <input type="text"/>
Work allowances (DO NOT include allowances that are reimbursements for actual expenses e.g. travel, tools or clothing)	\$ <input type="text"/>
Overtime	\$ <input type="text"/>
Bonuses	\$ <input type="text"/>
Leave loading	\$ <input type="text"/>
Other (please specify)	\$ <input type="text"/>

Privacy Notice

The Department of Housing and Public Works is collecting personal information on this form to provide you with housing assistance. To assist you with your housing needs and services, your personal information may be disclosed to partner agencies, service providers, local governments and non-governmental organisations that may be able to provide you with housing or support services. They may, to assist you with your housing needs and services, pass on the information to other partner agencies, service providers, local governments and non-governmental organisations that may be able to provide you with housing 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 otherwise be disclosed to any other third party without your consent. More information about the Department's privacy policy is available on our website at www.hpw.qld.gov.au

Declaration - employer/company representative to sign

Signature:

Print name:

Date: / /

Position:

Phone:

Please return completed form to your nearest Housing Service Centre.