

Department of Families, Seniors, Disability Services and Child Safety

APPLICATION CLAIM FOR ELECTRICITY REBATE

This form is an example which can be tailored and used by proprietors/landlords of residential home parks, multi-unit residential premises and similar residential installations whose tenants do not have a direct account with a Retailer

This form must be completed by the proprietor/landlord and applicant. Following completion, this form must accompany the Form 502 submitted by the proprietor/landlord to the electricity retailer.

Privacy notice:

The electricity retailer is collecting this information to assess your eligibility and manage payments for the electricity rebate if it is granted. The electricity retailer usually gives some or all this information to:

- Services Australia (Centrelink)
- Department of Veterans' Affairs (DVA)
- Department of Home Affairs (DHA)
- Department of Families, Seniors, Disability Services and Child Safety (DFSDSCS)
- Department of Customer Service, Open Data and Small and Family Business, Digital Customer Smart Service Queensland (Card and Concession Services).

| Section 1 – Proprietor/landlord details To be completed by the proprietor or landlord | | | | |
|--|--------------------------|--|--|--|
| Proprietor's Given Name | Proprietor's Surname | | | |
| Business name and full premises address for which the rebate is claimed | Contact telephone number | | | |
| Electricity Retailer: | | | | |
| Section 2 – Applicant details To be completed by the applicant | | | | |
| Given Name | Surname | | | |
| Full Residential Address | Telephone Number | | | |

Section 3 – Eligibility criteria

To be completed by the applicant

| l h | old <u>one</u> of the following current and valid cards: (Please tick ✓ appropriate box/boxes) | PLEASE PROVIDE CARD/FILE NUMBER | | |
|-----|---|--|--|--|
| | PENSIONER CONCESSION CARD Card Issued by: (Please tick ✓ appropriate box) □ Department of Veterans' Affairs: or □ Services Australia (Centrelink) | Veterans' Affairs File Number Centrelink CRN | | |
| | HEALTH CARE CARD issued by Centrelink (excluding Commonwealth Seniors Health Card) | Centrelink CRN | | |
| | DVA VETERAN GOLD CARD* issued by Department of Veterans' Affairs embossed with TOTALLY & PERMANENTLY INCAPACITATED (TPI) WAR WIDOW/WIDOWER *Including Special Rate Disability Pension (SRDP) and wholly Dependent Partner Payment (WDP) | Veterans' Affairs File Number | | |
| | QUEENSLAND SENIORS CARD issued by Department of Families, Seniors, Disability Services and Child Safety | Card Number | | |



Signature of Applicant: _

Department of Families, Seniors, Disability Services and Child Safety

APPLICATION CLAIM FOR ELECTRICITY REBATE

| | OLAIM I ON LLL | OTRIOTTIREBATE |
|-------|---|---|
| | ASYLUM SEEKERS – ImmiCard issued by Department of Home Affairs | Card Number |
| | I live with: (Please read the following statement carefull | y and tick ✓ the box to confirm that this applies to your living |
| | l live alone or only with persons as described below: - With my spouse/defacto and/or other persons who are with other people who hold a concession card or Queeter with other people who receive a Centrelink, Family Asser | nsland Seniors Card istance or Dept of Veterans' Affairs payment, and who <u>DO NOT</u> pay ren d who <u>DO NOT</u> pay rent AND |
| | tion 4 – Consent and declaration e completed by the applicant | |
| Serv | ces Australia CCeS customer consent | |
| V | e <electricity retailer=""> to use Centrelink Confirmation eServices</electricity> | s to perform a Centrelink/DVA enquiry of my Centrelink or Department of enable the business to determine if I qualify for a concession, rebate or |
| • S | ervices Australia (the agency) to provide the results of that enquerstand that: | iry to <electricity retailer="">.</electricity> |
| • th | e agency will disclose personal information to <electricity retail<="" td=""><td>er> including my <name address="" and="" characteristic="" confirm="" eligibility="" for="" in="" included="" my="" payment="" profile)="" status="" td="" the<="" to="" type="" your=""></name></td></electricity> | er> including my <name address="" and="" characteristic="" confirm="" eligibility="" for="" in="" included="" my="" payment="" profile)="" status="" td="" the<="" to="" type="" your=""></name> |
| • th | is consent, once signed, remains valid while I am a customer of | <electricity retailer=""> unless I withdraw it by contacting the <electricity <electricity="" agency="" and="" from="" ils="" it="" provide="" retailer="" the="" to=""> so my eligibility.</electricity></electricity> |
| | I withdraw my consent or do not alternatively provide proof of my ovided by <electricity retailer="">.</electricity> | y circumstances/details, I may not be eligible for the electricity rebate |
| Decla | aration | |
| | se that the above address is my principal place of residence and and the above electricity account is solely or jointly in my name | d is the only residence within Queensland for which the rebate is claimed. |
| • 1 | | circumstances which may affect my eligibility for the electricity rebate. |
| • < D | Electricity Retailer> to disclose my personal information to the D | |
| I und | erstand that: | |
| R | etailer> personal information including my name, address and ca | |
| • | nis consent, once signed, remains valid while I am a customer of can obtain proof of my circumstances/details from DHA or DFSI e electricity rebate can be determined. | f unless I withdraw it by contacting <electricity retailer="">. DSCS and provide it to (the Electricity Retailer) so that my eligibility for</electricity> |
| рі | I withdraw my consent or do not alternatively provide proof of movided by the Queensland Government. are that all the information that I have given is true and correct. | ny circumstances/details, I may not be eligible for the electricity rebate |

Date: ___/__/_