

Residential Rent Relief application form



Please call Housing Connect on **1800 800 588** if you need help to complete this application.

Section A Tenant eligibility check

Completing this section first will help you check if you are eligible for the program. The criteria apply to the tenant/s and supporting documentation must be provided. The information will be used to determine if the landlord or agent will receive the Residential Rental Relief, subject to approval by the Department of Justice. Please place a tick in each box to determine your eligibility. All boxes must be ticked to be eligible. If you have already received Rent Relief but require extra support, you will need to complete an **Application for Residential Relief Extra Support form** available at www.communities.tas.gov.au

1 ▶ Each eligible tenant must demonstrate (Please ✓ tick)

Criteria

- I am renting or boarding in the private market
- My portion of the rent is more than 30 per cent of my gross income
- I am in financial hardship because of COVID19 (e.g. loss of income)
- The household has less than \$5,000 in total savings
- Your identity

Checklist of supporting documentation

- Tenancy Agreement or Statutory Declaration
- Income statement/s or payslip/s*
- Earlier income statement/s or payslip/s*
- Bank statements recording 6 months' activity* †
- Driver's licence, passport, birth certificate, Medicare card or other*

* If there is more than one signatory tenant who is seeking a rent reduction, then each of those tenants must provide supporting documentation to demonstrate that each of them is experiencing financial hardship because of COVID-19.

† Further bank statements may be requested to ensure your eligibility.

Section B Tenant details

Please provide your contact information so that we can notify you about the status of the application. If there is more than one signatory tenant who is seeking a rent reduction, then only list the names of those tenants that are considered eligible in Section A. Please do not include the names of tenants who are not seeking a rent reduction or who are not eligible.

7 ▶ If there is more than one tenant listed in Section B, each of these tenants agrees to

The reduced rent payable of:	<input type="text"/>	per week, for tenant 1
	<input type="text"/>	per week, for tenant 2
	<input type="text"/>	per week, for tenant 3
	<input type="text"/>	per week, for tenant 4
	<input type="text"/>	per week, for tenant 5

8 ▶ Signatures

By signing this I am also aware that any subsidy paid to the landlord or agent as part of the Residential Rental Relief will be calculated on the basis of reduced rent payable only for approved eligible tenants and will extend only until 30 June 2021, or until the figure of 4 weeks rent, or \$2,000 is reached.

Signed by landlord or agent

Date

Signed by tenant 1

Date

Signed by tenant 2

Date

Signed by tenant 3

Date

Signed by tenant 4

Date

Signed by tenant 5

Date

Section D Payment details

Please nominate if the landlord or the agent will receive the Residential Rental Relief, subject to approval by the Department of Justice and provide your contact information so that we can notify you about the status of the application.

9 ▶ Representative Landlord Agent

Given name/s

Family name

Email

Phone

10 ▶ I/we would like the Department of Justice to

Please credit my/our account listed below for the Residential Rental Relief Grant

Bank

Account name

BSB

Account number

Completed forms

Email to

rda@justice.tas.gov.au

Contact Housing Connect on **1800 800 588** for more help on how to apply.

Or mail to

Rental Services
P.O. Box 56
Rosny Park
Tasmania, 7018

Please do not provide original documents if submitting this application by post. Copies and images of supporting documentation must be clearly legible to be accepted.

Office use only - Department of Justice

	B	C	SHIP-UID	Criteria and supporting documentation										Outcome			
				1		2		3		4		5		ELIGIBLE	NOT		
				MET	SD	MET	SD	MET	SD	MET	SD	MET	SD				
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Assessed grant payable

Reason for not eligible

Other comments (if any)

Assessment Officer

Date

Phone number

Payment ID

Duplicate check No duplicates Duplicate record > not approved

Approval Approved Not approved

Notification Primary tenant Landlord or agent

Grant paid

Payment officer

Date