

# APPLICATION CLAIM FOR ELECTRICITY REBATE

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

## Melton Views CTS 55067

Proprietor's Given Name

Proprietor's Surname

# 27 Melton TCE, TOWNSVILLE CITY QLD 4810

Business name and full premises address for which the rebate is claimed

1300 803 803
Contact telephone number

**Telephone Number** 

Electricity Retailer: .....

Section 2 – Applicant details	(Customers to complete from this section only
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To be completed by the applicant

Give	n Na	me								

Surname

Full	Residential Address	

## 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		
	HEALTH CARE CARD issued by Centrelink (excluding Commonwealth Seniors Health Card)			
	<ul> <li>DVA VETERAN GOLD CARD* issued by Department of Veterans' Affairs embossed with</li> <li>TOTALLY &amp; PERMANENTLY INCAPACITATED (TPI)</li> <li>WAR WIDOW/WIDOWER</li> <li>*Including Special Rate Disability Pension (SRDP) and wholly Dependent Partner Payment (WDP)</li> </ul>	Veterans' Affairs File Number		
	<b>QUEENSLAND SENIORS CARD</b> issued by Department of Families, Seniors, Disability Services and Child Safety			



Department of Families, Seniors, Disability Services and Child Safety

# APPLICATION CLAIM FOR ELECTRICITY REBATE

ASYLUM SEEKERS – ImmiCard
Home Affairs

Card Number

# Who I live with: (Please read the following statement carefully and tick $\checkmark$ the box to confirm that this applies to your living arrangements)

I live alone or only with persons as described below:

- With my spouse/defacto and/or other persons who are wholly dependent on me
- With other people who hold a concession card or Queensland Seniors Card
- With other people who receive a Centrelink, Family Assistance or Dept of Veterans' Affairs payment, and who DO NOT pay rent
  - With other people who provide care and assistance, and who DO NOT pay rent AND

issued by Department of

I DO NOT share my residence with any other persons except casual visitors.

## Section 4 – Consent and declaration

To be completed by the applicant

#### Services Australia CCeS customer consent

I authorise:

- the <Electricity Retailer> to use Centrelink Confirmation eServices to perform a Centrelink/DVA enquiry of my Centrelink or Department of Veterans' Affairs customer details and concession card status to enable the business to determine if I qualify for a concession, rebate or service.
- Services Australia (the agency) to provide the results of that enquiry to <Electricity Retailer>.
- I understand that:
- the agency will disclose personal information to <Electricity Retailer> including my <name/address/payment type/payment status and concession card type and status> (add and delete characteristics included in your characteristic profile) to confirm my eligibility for the electricity rebate.
- this consent, once signed, remains valid while I am a customer of <Electricity Retailer> unless I withdraw it by contacting the <Electricity Retailer> or the agency. I can get proof of my circumstances/details from the agency and provide it to <Electricity Retailer> so my eligibility for the electricity rebate 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 electricity rebate provided by <Electricity Retailer>.

#### Declaration

I advise that the above address is my principal place of residence and is the only residence within Queensland for which the rebate is claimed by me and the above electricity account is solely or jointly in my name.

- I will notify <Electricity Retailer> immediately of any change in my circumstances which may affect my eligibility for the electricity rebate. I authorise:
- <Electricity Retailer> to disclose my personal information to the Department of Home Affairs (DHA) or Department of Families, Seniors, Disability Services and Child Safety (DFSDSCS) and their service delivery agent (Card and Concession Services, Digital Customer -Smart Service Queensland) to confirm my eligibility for the electricity rebate.
- DHA or DFSDSCS to provide the results of that enquiry to <Electricity Retailer>.

I understand that:

- DHA or DFSDSCS will use information I have provided to to confirm my eligibility for the electricity rebate and will disclose to<Electricity Retailer> personal information including my name, address and card number and status.
- this consent, once signed, remains valid while I am a customer of unless I withdraw it by contacting < Electricity Retailer>.
- I can obtain proof of my circumstances/details from DHA or DFSDSCS and provide it to (the Electricity Retailer) so that my eligibility for the electricity rebate 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 electricity rebate provided by the Queensland Government.

I declare that all the information that I have given is true and correct.

Signature of Applicant: \_

Date: \_\_\_/\_\_/

Please note: a signature is required to process your rebate.

Please return the completed form with your eligible card copy to PO Box 404 NUNDAH QLD 4012 or to rebates@altogethergroup.com.au