

### Department of Families, Seniors, Disability Services and Child Safety

# 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	
The Cove Port of Airlie CTS 46827	
Proprietor's Given Name	Proprietor's Surname
THE COVE, COCONUT GR AIRLIE BEACH QLD 480	1300 803 803
Business name and full premises address for which the rebate is claimed	Contact telephone number
Electricity Retailer:	
Section 2 – Applicant details (Customers to complete from To be completed by the applicant	n this section only)
Given Name Surnan	ne

#### Section 3 – Eligibility criteria

To be completed by the applicant

Full Residential Address

I hold <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
	<b>DVA VETERAN GOLD CARD*</b> issued by Department of Veterans' Affairs embossed with	
	☐ TOTALLY & PERMANENTLY INCAPACITATED (TPI)	Veterans' Affairs File Number
	□ WAR WIDOW/WIDOWER *Including Special Rate Disability Pension (SRDP) and wholly Dependent Partner Payment (WDP)	
	QUEENSLAND SENIORS CARD issued by Department of Families, Seniors, Disability Services and Child Safety	Card Number

Telephone Number



Signature of Applicant: \_

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

4012 or to rebates@altogethergroup.com.au

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CLAIM FOR ELECTRICITY REDATE		
ASYLUM SEEKERS – ImmiCard issued by Department of Home Affairs	Card Number	
Who I live with: (Please read the following statement carefully and tick ✓ 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 rer  - With other people who provide care and assistance, and who DO NOT pay rent AND  - 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 eService</electricity>	s to perform a Centrelink/DVA enquiry of my Centrelink or Department of	
Veterans' Affairs customer details and concession card status to service.	enable the business to determine if I qualify for a concession, rebate or	
<ul> <li>Services Australia (the agency) to provide the results of that enqu I understand that:</li> </ul>	iry to <electricity retailer="">.</electricity>	
• the agency will disclose personal information to <electricity retail<="" th=""><th>ler&gt; including my <name address="" and="" characteristic="" confirm="" eligibility="" for="" in="" included="" my="" payment="" profile)="" status="" th="" the<="" to="" type="" your=""></name></th></electricity>	ler> including my <name address="" and="" characteristic="" confirm="" eligibility="" for="" in="" included="" my="" payment="" profile)="" status="" th="" the<="" to="" type="" your=""></name>	
<ul> <li>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.</electricity></electricity></electricity></li> </ul>		
•	ny circumstances/details, I may not be eligible for the electricity rebate	
Declaration		
I advise that the above address is my principal place of residence and by me 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 e.	
<ul> <li>I will notify <electricity retailer=""> immediately of any change in my I authorise:</electricity></li> </ul>	r circumstances which may affect my eligibility for the electricity rebate.	
• <electricity retailer=""> to disclose my personal information to the I</electricity>		
	DSCS and provide it to (the Electricity Retailer) so that my eligibility for	
<ul> <li>if I withdraw my consent or do not alternatively provide proof of n provided by the Queensland Government.</li> </ul>	ny circumstances/details, I may not be eligible for the electricity rebate	
I declare that all the information that I have given is true and correct.		

Please return the completed form with your eligible card copy to PO Box 404 NUNDAH QLD

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