



Department Child Safety, Seniors and Disability Services

**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 Child Safety, Seniors and Disability Services (DCSSDS)
- Department of Transport and Main Roads, 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*

I hold <u>one</u> of the following current and valid cards: (Please tick ✓ appropriate box/boxes)		PLEASE PROVIDE CARD/FILE NUMBER
<input type="checkbox"/>	<b>PENSIONER CONCESSION CARD</b> <i>Card Issued by: (Please tick ✓ appropriate box)</i> <input type="checkbox"/> Department of Veterans' Affairs: or <input type="checkbox"/> Services Australia (Centrelink)	Veterans' Affairs File Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Centrelink CRN <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/>	<b>HEALTH CARE CARD</b> issued by Centrelink <b>(excluding Commonwealth Seniors Health Card)</b>	Centrelink CRN <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/>	<b>DVA VETERAN GOLD CARD*</b> issued by Department of Veterans' Affairs embossed with <input type="checkbox"/> <b>TOTALLY &amp; PERMANENTLY INCAPACITATED (TPI)</b> <input type="checkbox"/> <b>WAR WIDOW/WIDOWER</b> *Including Special Rate Disability Pension (SRDP) and wholly Dependent Partner Payment (WDP)	Veterans' Affairs File Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/>	<b>QUEENSLAND SENIORS CARD</b> issued by Department of Communities, Disability Services and Seniors	Card Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/>	<b>ASYLUM SEEKERS – ImmiCard</b> issued by Department of Home Affairs	Card Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

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**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 rent
  - 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 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 Child Safety, Seniors and Disability Services (DCSSDS) and their service delivery agent (Card and Concession Services, Smart Service Queensland) to confirm my eligibility for the electricity rebate.
- DHA or DCSSDS to provide the results of that enquiry to <Electricity Retailer>.

I understand that:

- DHA or DCSSDS will use information I have provided 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 DCSSDS 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: \_\_\_\_/\_\_\_\_/\_\_\_\_