Australian Government
Services Australia

centrelink

Residential Aged Care
Calculation of your cost of care (SA457)

About this form

We understand that entering into aged care can be a sensitive time.

If you are entering an aged care home, the Australian Government may subsidise your aged care fees. **This form collects details of your income and assets so we can calculate the amount you will pay towards your residential aged care.**

A simpler digital version of this form is available by going to **servicesaustralia.gov.au/forms** and selecting 'Aged Care Calculation of your cost of care (SA486)'.

Fee Estimator

You can get an estimate of the amount you may be asked to pay towards your residential aged care by going to **www.myagedcare.gov.au** and searching for 'fee estimator'.

You can talk to a **Financial Information Service (FIS)** officer who will give you information about the financial aspects of aged care. Call us on **132 300** and say '**Financial Information Service**' when we ask why you are calling.

For more information

Go to **servicesaustralia.gov.au/agedcare** or call us on Freecall™ **1800 227 475**.

To speak to us in your language, call us on **131 202**. Call charges may apply.

If you have a hearing or speech impairment, you can contact the TTY service on Freecall™ **1800 555 677**.

If you receive a Department of Veterans' Affairs (DVA) payment, and would like to discuss your assessment you can call them on Freecall™ **1800 555 254**.

When to use this form

Do you want an assessment for residential aged care?

- **No** → If you want an assessment for a home care package, complete the **Home Care Package Calculation of your cost of care (SA456)** form instead.
- **Yes** → **Are you receiving a means tested income support payment (for example, Age Pension, Service or Disability Support Pension)?**
  - **Yes** → **If you receive a means tested payment from Centrelink or DVA, do not complete this form** (see the next page for a list of payments). Instead:
    - If you **own or part own your home** including in a retirement village: Complete the shorter **Residential Aged Care Property details for Centrelink and DVA customers (SA485)** form.
    - If you **do not own your home:** We can automatically complete an assessment for you when you enter residential aged care.

    If your income and assets have not been updated in the last 2 years or have changed since you last made an update, **go** online through myGov or call Centrelink on **132 300** or DVA on **1800 555 254**.

    If you need a pre commencement fee letter call Centrelink on **1800 227 475** or DVA on **1800 555 254**.
  - **No** → **Do you agree to provide your income and asset details?**
    - **No** → If you do not wish to provide your income and asset details, complete this form and answer No at question 13. You will pay the maximum means-tested care fee until you reach the annual or lifetime cap.

      This means that your provider can require you to pay the **basic daily fee, maximum means-tested care fee** and **accommodation cost**.
    - **Yes** → **Complete this form**

      This assessment is valid for **120** days from when we first notify you of the outcome.

Keep these Notes (pages 1 to 4) for your information.

The following information is for your reference to help you fill in this form.

Calculating your cost of care

All aged care residents may be asked to pay a basic daily fee. In addition, some residents may also be required to pay a means-tested care fee. This form is used to calculate the amount you will pay towards your cost of care.

There are annual and lifetime caps that apply to the means-tested care fee for residents who entered an aged care home after 1 July 2014. Services Australia will write to you and your service provider once you have reached the annual or lifetime cap.

Some residents will have their accommodation costs paid in full or in part by the Australian Government. Others will need to pay the accommodation cost they negotiate with their aged care home provider.

Income support payments

Non-means tested payments may include:

- Age Pension (Blind)
- Disability Support Pension (Blind)
- War Widow(er)s Pension
- Disability Pension paid by DVA (not including income support supplement)
- Income Support Pension (Blind) paid by DVA

Means tested payments may include:

- Age Pension
- Disability Support Pension
- Carer Payment (not including Carer Allowance)
- Special Benefit
- Widow Allowance
- Service Pension
- Income Support Supplement
- Veterans Payment
- Farm Household Allowance

Who should complete this form?

If you are not receiving any Centrelink or DVA payments OR you are receiving a Centrelink or DVA **non-means** tested payment listed above, you will need to complete this form so we can calculate your cost of care. This is because we do not know enough about your income and assets to complete your assessment.

Who should not complete this form?

If you are receiving one of the **means tested** payments from Centrelink or DVA listed above, and:

- you do not own your home, and
- you have updated your records within the last 2 years, or
- your assets and income have not changed since you last provided an update

do not complete this form. We have enough information about you to complete your assessment.

If you are receiving one of the Centrelink or DVA **means tested** payments listed above and you own or part own your home (including in a retirement village), **do not complete this form**. You will need to complete the shorter **Residential Aged Care Property details for Centrelink and DVA customers (SA485)** form, as we need to collect information about your home to complete your assessment.

Protected person for aged care purposes

For aged care legislation purposes, a protected person is:

- your partner or dependent child
- your carer[1] who is eligible to receive an Australian Government income support payment and who has lived in your home with you for the past 2 years
- your close relative who is eligible to receive an Australian Government income support payment and who has lived in your home with you for the past 5 years.

If your home is occupied by a protected person, it may not be counted as an asset for aged care purposes.

Your carer or close relative will need to give their consent in this form to allow Services Australia or DVA to check their eligibility for an income support payment.

This exemption may be lost if the protected person who has been living in the home, moves out of the home or loses their eligibility for their income support payment.

1 It is not necessary for your carer to have received a Carer Payment or Carer Allowance in order to be considered a carer. However, at the date you enter care or complete this form your carer must meet the eligibility criteria for an Australian Government income support payment (notionally entitled person).

Assets for the purposes of aged care

An asset is any property or item of value you (and/or your partner) own, or have an interest in, including those held outside Australia. Examples include real estate, shares, household contents and personal effects.

If you are a member of a couple, you are deemed to own half of the total combined assets, regardless of whose name these are held in.

If you enter residential aged care on or after 1 July 2014, and your home is not occupied by a protected person, it will be counted as an asset. However, the amount of the home included as an asset will be capped.

If your home is counted as an asset, you do not need to have it professionally valued. If required we will verify the estimated value of the property at no cost to you.

If you have made a gift, the limit you are able to give away is $10,000 in the previous 12 months or $30,000 in the previous 5 years – this cannot include more than $10,000 in any year. Gifts over these amounts will be considered an asset in your assessment.

Income for the purposes of aged care

Income, for the purposes of aged care, is not the same as taxable income. Your assessed income includes:

- income from work
- income support payments from the Australian Government, such as the Age Pension, a Service Pension or an Income Support Supplement
- income from financial investments
- net income from rental properties
- War Widow(er)s Pension and some disability pensions
- net income from businesses, including farms
- superannuation and overseas pensions, income from income stream products such as annuities and allocated pensions
- family trust distributions or dividends from private company shares
- income from outside Australia.

If you have a partner, you will be asked to answer questions about your combined income. Your income will be assessed as half of the total combined income, regardless of whose name it is in.

Financial investments deemed to be earning income include bank accounts and other financial investments. It is important you tell us about all the bank accounts and financial investments you (and/or your partner) have no matter what income they are actually earning.

Money or assets that you (and/or your partner) have given away in the last 5 years, may be considered to earn income.

Retirement villages or independent living units

Retirement villages or independent living units are not residential aged care homes and are not subsidised by the Australian Government. A retirement village provides accommodation for retirees (over the aged of 55). Independent living units are a housing option for older people who want to live independently.

Residents of retirement villages or those living in independent living units generally enter into an agreement that outlines how much they will pay to enter and the amount (if any) refundable after they leave. Following departure the amount refundable may be subject to this assessment.

Person signing on your behalf

This form must be signed by the person the application is for or someone who is authorised to sign on their behalf. An authorised person may be an Enduring Power of Attorney, Power of Attorney (financial), or a person/organisation holding an administrative or financial order.

A person can apply for an assessment for the cost of care on behalf of someone else if:

- they are already acting as the person's nominee
- they hold a power of attorney or guardianship order
- a letter from a doctor, nurse or similar health professional is provided stating that the customer is unable to sign the application form
- the application is made by the Director of Nursing at the aged care home where the customer is a resident.

Where the person is deceased only the executor of the will or a person holding letters of administration is authorised to sign on behalf of their estate.

Authorising a person or organisation to enquire or act on your behalf

You can authorise a person or organisation to enquire or act on your behalf for Centrelink payments and services including Aged Care. You will need to complete the **Authorising a person or organisation to enquire or act on your behalf (SS313)** form at the back of this form and return it separately. If you want more information about nominee arrangements, go to **servicesaustralia.gov.au/nominees** or call us on Freecall™ **1800 227 475**.

If you are receiving a DVA means tested payment (see notes page 2 of 4) complete the **Aged Care Request for a nominee for Department of Veterans' Affairs customers (AC019)** form by going to **servicesaustralia.gov.au/forms**.

For information about the DVA authorised person arrangements, call DVA on Freecall™ **1800 555 254**.

Keep these Notes (pages 1 to 4) for your information.

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Filling in this form

- Use black or blue pen.
- Print in BLOCK LETTERS.
- Where you see a box like this ☐ ▶ ***Go to 1*** skip to the question number shown.

You will see **entry/application date** in many of the questions located in this form. Below is a brief explanation of what the term means and what we need from you.

Entry date – If you are permanently living in an aged care home you need to answer the questions and provide the documentation based on your date of entry into the home. For example, if you permanently moved into an aged care home on 1 January 2019 you need to provide supporting documents that show your income and assets on the date you entered care.

Application date – If you have not moved into an aged care home you need to answer the questions and provide supporting documentation based on your current situation. For example, if you lodged the form on 1 January 2019 you need to provide supporting documents that show your income and assets on the date you lodged this form.

1 What type of care do you (the person who the assessment is for) want an assessment for?

residential aged care ☐ ▶ *Go to next question*

home care package ☐ ▶ STOP Do not complete this form. See 'When to use this form' on the front page.

2 Do you receive a means tested income support payment from Centrelink or DVA?

For a list of means tested payments, refer to 'Income support payments' in the **Notes Section**, on page 2 of the notes.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ STOP Do not complete this form. See 'When to use this form' on the front page.

3 Are you completing this form on behalf of someone else?

For example, partner, parent or relative.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Your full name

Your relationship to the person the assessment is for

If you wish to be listed as a nominee for aged care purposes, you and/or the person this assessment is for will need to complete the nominee section at the back of this form. Nominees may be contacted by us regarding this assessment.

4 Do you (the person who the assessment is for) have a partner?

In this form we will collect information about your partner. If your partner would like an assessment, they need to complete a separate assessment form.

For this assessment, a partner can be either:

- a person you are legally married to, or who you were living with in a de facto relationship, but are now living apart on a permanent basis due to **a health related reason**, for example, if the person entered residential aged care
- a person you are legally married to, and normally live with on a permanent basis
- a person who lives with you in a de facto relationship, although you are not legally married to that person
- a person in a registered relationship.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ We will be asking basic information about your partner.

If your partner would like an assessment, they need to complete a separate assessment form (SA457).

▶ *Go to next question*

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The following questions are about the person the assessment is for and their partner.

You (the person the assessment is for)

5 Your name

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Second given name

6 Your gender

Male ☐

Female ☐

7 Your date of birth

/ /

8 Do you have a Centrelink or DVA reference number?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Centrelink Customer Reference Number (if known)

– –

Department of Veterans' Affairs reference number

Name of Department of Veterans' Affairs payment

Your partner (of the person the assessment is for)

5 Your partner's name

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Second given name

6 Your partner's gender

Male ☐

Female ☐

7 Your partner's date of birth

/ /

8 Does your partner have a Centrelink or DVA reference number?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Centrelink Customer Reference Number (if known)

– –

Department of Veterans' Affairs reference number

Name of Department of Veterans' Affairs payment

You (the person the assessment is for)

9 Have you been known by any other name(s)?

Include:
- name at birth
- name before marriage
- previous married name
- Aboriginal or skin name
- alias
- adoptive name
- foster name.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

1 Other name

Type of name (for example, name at birth)

2 Other name

Type of name (for example, name before marriage)

If you need more space, provide a separate sheet with details.

10 **Read** this before answering the following question.

If you provide an email address or mobile phone number, you may receive electronic messages (SMS or email) from us. To read the Terms and Conditions, go to **servicesaustralia.gov.au/em** or visit one of our Centrelink service centres.

Your contact details

Phone number

Email

11 What is your current address including if you live in residential aged care?

Postcode

12 Postal address if different to home address

Postcode

Your partner (of the person the assessment is for)

9 Has your partner been known by any other name(s)?

Include:
- name at birth
- name before marriage
- previous married name
- Aboriginal or skin name
- alias
- adoptive name
- foster name.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

1 Other name

Type of name (for example, name at birth)

2 Other name

Type of name (for example, name before marriage)

If you need more space, provide a separate sheet with details.

10 **Read** this before answering the following question.

If your partner provides an email address or mobile phone number, they may receive electronic messages (SMS or email) from us. To read the Terms and Conditions, go to **servicesaustralia.gov.au/em** or visit one of our Centrelink service centres.

Your partner's contact details

Phone number

Email

11 Your partner's home address

Postcode

12 Your partner's postal address if different to home address

Postcode

Your assessment

13 Do you want to provide your income and asset details so we can calculate your cost of care?

No ☐ ▶ You will pay the maximum means-tested care fee until you reach the annual or lifetime cap.

This means that your provider can require you to pay the **basic daily fee, maximum means-tested care fee** and **accommodation cost**.

▶ ***Go to 64***

Yes ☐ ▶ You are giving us permission to disclose your information to the Department of Social Services, the Department of Health, and/or the Department of Veterans' Affairs.

▶ *Go to next question*

14 What do you want this assessment for?

The entry/application date is the date you have entered care or the date you have lodged this form.

Tick one only

Option 1: You are planning on going into a residential aged care home

You will need to answer the questions in the form and provide supporting documentation based on your current situation.

We will use the date you lodge the form as the **application date.** ☐ ▶ ***Go to 15***

Option 2: You are now or were in a residential aged care home

You will need to answer the following questions and provide supporting documentation based on your situation at the date of **entering the residential aged care home**.

What was that entry date?

/ /

☐ ▶ ***Go to 15***

Option 3: You have entered a residential aged care home before 1 July 2014

You are a residential aged care home resident who was already in permanent residential care **before 1 July 2014** and are thinking of having an assessment done under the current means testing rules as you are considering changing aged care provider.

You will need to call us on Freecall™ 1800 227 475.

Dependent children

15 **Read** this before answering the following question.

For aged care purposes, to be a dependent child the young person must be:

- under 16 years of age, or
- 16–24 years of age and receiving full-time education at a school, college or university, **and** not in full-time employment or receiving a Centrelink income support payment.

You must be legally responsible (whether alone or jointly with another person) for their day-to-day care, welfare and development, or under a legal obligation to provide financial support to them.

Do you (and/or your partner) have any dependent children/students in your care?

No ☐ ▶ ***Go to 17***

Yes ☐ ▶ Give details below

Details of the **youngest** dependent child/student in your care.

Dependent family name

Dependent first given name

Dependent second given name

Dependent gender

Male ☐

Female ☐

Dependent date of birth

/ /

16 At the entry/application date did this dependent child/student live in the family home?

No ☐

Yes ☐

Your home details

17 Did you (and/or your partner) own or part-own your home at the entry/application date?

Answer 'Yes' to this question for situations including, but not limited to:

- you were paying off a mortgage on your home
- your home was in a retirement village and you had paid an entry contribution
- your home was owned by a private/family trust or a private company that was controlled by you (and/or your partner), or
- you have an agreement with somebody else who owns part of the home (business/family partnership).

No ☐ ▶ ***Go to 34***

Yes ☐ ▶ What is your home address or previous address if you are now living in residential aged care?

Postcode

18 Do you (and/or your partner) still own or part-own this home?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ ***Go to 20***

19 **Select** the **option** that applies to you:

Option 1: You sold your home ☐

How much was your home sold for? $

On what date was your home sold? / /

Option 2: You transferred the title of your home to someone else ☐

How much was your home worth at the time the title was transferred? $

On what date was the title transferred? / /

Did you receive anything in return for the title transfer?

No ☐

Yes ☐ ▶ How much did you receive?

$

Option 3: You vacated your home in a retirement village ☐

What amount was (or will be) paid to you (and/or your partner) when the retirement village unit was (is) vacated? $

When was (or will) this amount be paid to you (and/or your partner)? / /

Provide documentation which gives details of the sale of your home, the details of the transfer or details of the retirement village agreement.

For example:

- a solicitor's letter
- documentation which gives details of the sale/transfer of your home
- what has been done with the proceeds
- bank statements and agreements.

▶ ***Go to 31***

20 At the entry/application date, was your home a:

- retirement village unit
- mobile home or motor home
- caravan
- boat?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Type of asset

Estimated market value $

Balance of loan(s) $

Who owns your home?

Your share %

Your partner's share %

Other's share %

Do you have a partner who is/was living in your home at the entry/application date?

No ☐ ▶ ***Go to 26***

Yes ☐ ▶ ***Go to 26***

Provide documentation on the value of the mobile home/caravan/boat, refundable entry contributions or property.

Provide a copy of a statement showing the amount owing for any loans.

21 What type of property is your home:

House ☐

Townhouse (including duplex/triplex) ☐

Self contained flat (part of or attached to a house) ☐

Unit/flat ☐

How many units/flats are in the block?

Part of a farming property ☐

Other ☐ ▶ Give details below

22 Select the **option** that applies to you and answer the questions based on the entry/application date:

Option 1: Small property, suburban block or apartment/unit

My home is on land up to and including 5 acres (2 hectares) ☐ ▶ Give details below

Estimate the market value of your property including the buildings $

Balance of loan(s) for your property $

Who owns your home as shown on the property title?

Your share %

Your partner's share %

Other's share %

Do you have a partner who is living in your home at the entry/application date?

No ☐ ▶ ***Go to 23***

Yes ☐ ▶ ***Go to 26***

If you have a mortgage provide a copy of a statement showing the amount owing for each mortgage.

Option 2: Large property or large suburban block

My home is on land over 5 acres (2 hectares) ☐ ▶ Give details below

For example, if your home is on a 20 acre property provide separate estimated values for the home and the first 5 acres of land in the first box and the remaining 15 acres in the second box.

Estimate the market value of the first 5 acres of your property including the buildings $

Estimate the market value of the remaining acreage $

Balance of loan(s) for your property $

Who owns your home as shown on the property title?

Your share %

Your partner's share %

Other's share %

Do you have a partner who is living in your home at the entry/application date?

No ☐ ▶ ***Go to 23***

Yes ☐ ▶ ***Go to 23***

If you have a mortgage provide a copy of a statement showing the amount owing for each mortgage.

23 What is the legal description of the property (for example, lot, section, parish, etc.)?

This information can be found on a rates notice.

If the property is made up of more than one title, provide details for each separate title.

Provide a copy of the council rates notice.

24 What is the area or dimension of the property?

You do not need to answer this question if your home is a unit or flat.

Complete **one** of these measurements only.

Area in hectares

or Area in acres

or Area in square metres

or Dimensions X

25 Describe all buildings on the property

This will help us to value the property.

1 What is the approximate floor area in square metres?

How old is the building?

Type of construction

Exterior (for example, brick, timber)

Interior (for example, plaster, not lined)

Roof (for example, iron, tiled)

General condition (for example, fair, good, poor)

Total number of flats/units in complex (if applicable)

For residential building, number of bedrooms

Number of other rooms (**excluding** laundry, bathroom, toilet)

If you need more space, provide a separate sheet with details.

26 Are you (and/or your partner) using any rooms or buildings in your home property solely for business purposes?

This includes rooms used for a bed and breakfast or a room/office used solely for running a business.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Value of the rooms or buildings of your home property used only for business

$

27 Is any portion of the land surrounding your home property used primarily for business purposes?

This includes using the land for cultivation, orchards, grazing animals or accessed for other reasons such as camping sites.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Estimated value of the portion of the land (up to 2 hectares or 5 acres) surrounding your home property that you own and that is used primarily for business purposes

$

28 Is your home part of a farm property?

No ☐ ▶ ***Go to 30***

Yes ☐ ▶ Farm property primarily used for (for example, grazing, wheat, hobby)

29 Is the farm property currently operational/viable?

No ☐

Yes ☐

Is it possible to subdivide the farm property or farm home?

No ☐

Yes ☐

List any other constructions located on the property (for example, workers' quarters, manager's house)

If you need more space, provide a separate sheet with details.

30 Did you (and/or your partner) receive rental income from your home property at the entry/application date?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Provide documents showing details of the rental income and the outgoings (costs) for each property.

31 At the entry/application date, did any of the following people live in your home?

Tick all that apply. If there is more than 1 person provide a separate sheet for question 31 to question 33.

Carer: Any person providing daily care to you, who has occupied the home for at least 2 years ☐ ▶ ***Go to 32***

Close relative: your sister, brother, child, grandchild, or parent who has occupied the home for at least 5 years ☐ ▶ ***Go to 32***

None of the above ☐ ▶ ***Go to 34***

32 Does this person still live in the home?

No ☐ ▶ Date vacated

/ /

▶ *Go to next question*

Yes ☐ ▶ *Go to next question*

Consent by carer or close relative

33 **Read** this before answering the following question.

Services Australia or the Department of Veterans' Affairs needs to verify the period that your carer or close relative occupied your home and that they were eligible to receive an income support payment at the entry/application date.

Carer or close relative (protected person)

Make sure you have read the **Privacy and your personal information** on page 20 of this assessment and you have read the 'Protected Person' section on page 3 of the **Notes**.

Consent by carer or close relative

Details of carer or close relative

Family name

First given name

Second given name

Date of birth

/ /

Centrelink Customer Reference Number (if known)

– –

OR

Department of Veterans' Affairs reference number

Relationship to the applicant

Phone number

I consent to Services Australia or the Department of Veterans' Affairs using information collected from me for income support payment purposes and for the additional purpose of determining the value of the applicant's assets under the *Aged Care Act 1997*.

Signature of carer or close relative

Date

/ /

Your other property details

34 Other than your family home, did you (and/or your partner) have other properties in and/or outside of Australia at the entry/application date?

No ☐ ▶ ***Go to 44***

Yes ☐ ▶ Give details below

Address of the property

Postcode

Country (if not in Australia)

If you have/had more than one other property, at the entry/application date, you will need to copy and attach pages 9 to 10 answering questions **34** to **43** for each property.

35 What is the legal description of the other property (for example, lot, section, parish, etc.)?

This information can be found on a rates notice.

If the property is made up of more than one title, provide details for each separate title.

Provide a copy of the council rates notice.

36 Who owned/owns your other property as shown on the property title at the entry/application date?

You ☐ ▶ Percentage owned %

Your partner ☐ ▶ Percentage owned %

Other ☐ ▶ Give details below

Name of person/entity

Percentage owned %

Provide a copy of each title deed if you answered 'Other'.

37 What type of property is this?

- Vacant land ☐
- House on land larger than 2 hectares (5 acres) ☐
- Townhouse ☐
- Self contained flat (part of or attached to a house) ☐
- Units/flats ☐
- Retail premises ☐
- Commercial premises ☐
- Industrial premises ☐
- Farm/primary producer property ☐
- Market garden ☐
- Hobby farm ☐
- Bush block ☐
- House ☐
- Other ☐ ▶ Give details below

38 What is your estimate of the current market value of the property, including land, buildings and water assets (for example, water rights, allocations or licences)?

If your other property is counted as an asset, you do not need to have it professionally valued. If required, we will verify the estimated value of the property at no cost to you.

$

Provide a copy of the water rights, allocation or licence documents, if applicable.

Are there any circumstances affecting the value of the property?

This may include details such as:

- no water on property for grazing livestock
- lack of adequate fencing
- hills
- rocky ground
- natural bushland
- unusual title.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

If you need more space, provide a separate sheet with details.

39 Describe all buildings on the other property

This will assist us to value the property.

1 What is the approximate floor area in square metres?

How old is the building?

Type of construction

Exterior (for example, brick, timber)

Interior (for example, plaster, not lined)

Roof (for example, iron, tiled)

General condition (for example, fair, good, poor)

Total number of flats/units in complex (if applicable)

For residential building, number of bedrooms

Number of other rooms (excluding laundry, bathroom, toilet)

If you (and/or your partner) have more than 1 building on this property, provide a separate sheet with details.

40 What is the area or dimension of the other property?

Complete **one** of these measurements only.

Area in hectares

or Area in acres

or Area in square metres

or Dimensions X

If your property is made up of more than one title, provide a separate sheet with details of the area or dimensions for each title.

41 Was the property mortgaged or encumbered at the entry/application date?

No ☐ *Go to next question*

Yes ☐ Provide the:

- mortgage or loan agreement(s) showing which assets or properties are held as security against the loan (if applicable)
- statement of each loan account.

42 Did you (and/or your partner) receive **rental income** from your other property, at the entry/application date?

Include rental income from properties both in and/or outside Australia.

No ☐ *Go to next question*

Yes ☐ Provide documents showing details of the rental income and the outgoings (costs) for each property.

43 What is your estimate of the **current market value of the household contents** you (and/or your partner) own in the other property, at the entry/application date?

Only answer this question if this property is **not** your home property.

The **current market value** of the household contents is what you would get if you sold it. It is not the replacement or insured value.

If you do not provide an estimate, we will use a default amount of $10,000.

Include:

- all furniture (including soft furnishings such as curtains), antiques and works of art
- electrical appliances such as televisions and fridges.

Do not include:

- fixtures such as stoves and built-in items.

Current market value

$

Assets and income

44 What is your estimate of the **current market value** of your (and/or your partner's) **household contents** and **personal effects** at the entry/application date?

The **current market value** is the price that you would expect to get **if you sold the item**. It is not the replacement or insured value.

If you do not provide an estimate we will use a default amount of $10,000.

Include:

- all furniture (including soft furnishings such as curtains), antiques and works of art
- electrical appliances such as televisions and fridges
- jewellery for personal use.

Do not include:

- fixtures such as stoves and built-in items.

An estimate of the current market value

$

45 Did you (and/or your partner) own, partly own or have a financial interest in any **motor vehicles, boats, caravans or trailers** at the entry/application date?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a copy of a statement showing the amount owing for each loan, if applicable.

1

Type of asset (for example, car)

Make (for example, Ford)

Model (for example, Focus)

Year

Current market value $

Balance of loan(s) $

Your share %

Partner's share %

2

Type of asset (for example, car)

Make (for example, Holden)

Model (for example, Astra)

Year

Current market value $

Balance of loan(s) $

Your share %

Partner's share %

If you need more space, provide a separate sheet with details.

46 Give details below of all **accounts** held by you (and/or your partner) in banks, building societies or credit unions at the entry/application date.

Include:

- savings accounts
- cheque accounts
- term deposits
- accounts you hold in trust or under any other name
- joint accounts
- money held in church or charitable development funds
- money located in travel money cards or travellers cheques.

Accounts and term deposits outside Australia should be included, with the current balance in the type of currency in which it is invested. We will convert this into Australian dollars (AUD).

Do not include superannuation, shares, managed investments or an account used exclusively for funding from the National Disability Insurance Scheme (NDIS).

Provide evidence from your financial institution that shows your current account balance, BSB code, account number and account holder name(s). Copies can be provided.

ATM slips are not acceptable.

1

Name of bank, building society or credit union

Account number (this may not be your card number)

Type of account

Balance of account

Currency if not AUD

Your share %

Partner's share %

2

Name of bank, building society or credit union

Account number (this may not be your card number)

Type of account

Balance of account

Currency if not AUD

Your share %

Partner's share %

If you need more space, provide a separate sheet with details.

47 Did you (and/or your partner) have any **money invested in superannuation or income stream products** at the entry/application date?

Superannuation includes:

- approved deposit funds
- deferred annuities
- retirement savings accounts
- Self Managed Superannuation Funds (SMSF) and Small APRA Funds (SAF) if the funds are complying.

An **income stream product** is a regular series of payments which may be made for a lifetime or a fixed period by:

- a financial institution
- a superannuation fund
- a Self Managed Superannuation Fund (SMSF)
- a Small APRA Fund (SAF)
- an employer subject to Australian prudential regulations.

Types of income streams include:

- Allocated Pension (also known as Account Based Pension)
- Market-Linked Pension (also known as Term Allocated Pension)
- Annuities
- Defined Benefit Pension (for example, ComSuper pension, State Super pension and Australian Defence Force superannuation payments)
- Superannuation Pension (non-defined benefit).

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

If you have money invested in an income stream product provide a schedule for each fund.

Provide the statements for each fund, including council rates notices for any real estate held by SMSF and SAF.

1 Name of institution/fund manager

Name of fund

Account balance (if applicable) $

Amount that can be withdrawn as a lump sum (if applicable) $

Amount of income received (if any) $

How often (for example, monthly) per

Date of purchase / /

Your share %

Partner's share %

Continued

2 Name of institution/fund manager

Name of fund

Account balance (if applicable) $

Amount that can be withdrawn as a lump sum (if applicable) $

Amount of income received (if any) $

How often (for example, monthly) per

Date of purchase / /

Your share %

Partner's share %

If you need more space, provide a separate sheet with details.

48 Did you (and/or your partner) have any **managed investments** in and/or outside Australia at the entry/application date?

Include:
- investment trusts
- personal investment plans
- life insurance bonds
- managed fund
- friendly society bonds.

Do not include:
- conventional life insurance policies (policies that can be cashed in)
- funeral bonds
- superannuation or rollover investments
- investments purchased with a margin loan.

APIR code – is commonly used by fund managers to identify individual financial products.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a copy of the document which gives details (for example, certificate with number of units or account balance) for each investment.

1 Name of company

Name of product (for example, investment trust)

Type of product/option (for example, balanced, growth)

Number of units

APIR code (if known)

Current market value $

Currency if not AUD

Your share %

Partner's share %

2 Name of company

Name of product (for example, investment trust)

Type of product/option (for example, balanced, growth)

Number of units

APIR code (if known)

Current market value $

Currency if not AUD

Your share %

Partner's share %

If you need more space, provide a separate sheet with details.

49 At the entry/application date did you (and/or your partner) own any **shares**, or other **securities listed** on a stock/securities exchange in and/or outside Australia, or in public companies **not listed** on a stock exchange?

Include:
- futures
- options
- derivatives
- rights
- shares
- preference shares
- convertible notes.

Do not include:
- managed investments
- self managed superannuation funds.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide the statement for each share holding.

1 Name of the public company

ASX code (if you have one)

Number of shares held

Country if not Australia

Your share %

Partner's share %

2 Name of the public company

ASX code (if you have one)

Number of shares held

Country if not Australia

Your share %

Partner's share %

3 Name of the public company

ASX code (if you have one)

Number of shares held

Country if not Australia

Your share %

Partner's share %

If you need more space, provide a separate sheet with details.

50 Did you (and/or your partner) have any **bonds or debentures** at the entry/application date?

Bonds refer to government and semi-government bonds.

Include:

- investments in and/or outside Australia
- bonds or debentures outside Australia should be included, with the current balance in the type of currency in which it is invested. We will convert this into Australian dollars.

Do not include:

- friendly society bonds, funeral bonds or life insurance bonds/investments
- aged care accommodation bonds, aged care refundable accommodation deposits, or aged care refundable accommodation contributions.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a document which gives details for each bond or debenture.

1 Name of company

Type of investment

Current amount invested | Currency if not AUD

Your share % | Partner's share %

2 Name of company

Type of investment

Current amount invested | Currency if not AUD

Your share % | Partner's share %

If you need more space, provide a separate sheet with details.

51 Did you (and/or your partner) have any **funeral bonds, funeral investments** or have a contract to have funeral services provided for which an agreed sum has already been paid to the provider at the entry/application date?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide documentation showing details of the funeral bonds, funeral investments or a copy of each contract.

1 Name of company

Name of product

APIR code (if known) | Purchase price including instalments but not interest $

Current value as per latest statement $ | Your share % | Partner's share %

2 Name of company

Name of product

APIR code (if known) | Purchase price including instalments but not interest $

Current value as per latest statement $ | Your share % | Partner's share %

If you need more space, provide a separate sheet with details.

52 Did you (and/or your partner) have any **life insurance** policies that could be cashed in at the entry/application date?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a copy of the statement for each policy.

1 Name of product

Policy number

Number of units	Your share	Partner's share
	%	%

2 Name of product

Policy number

Number of units	Your share	Partner's share
	%	%

If you need more space, provide a separate sheet with details.

53 Have you (and/or your partner) paid a **lump sum accommodation payment to a residential aged care home** at the entry/application date?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

How much was paid	When was the last payment made
$	/ /

Provide a copy of a receipt for all lump sum accommodation payments and documents detailing the source of the funds. If the lump sum accommodation payment was paid in instalments, provide a receipt for each payment made.

54 Did you (and/or your partner) have **money on loan** to another person or organisation at the entry/application date?

Include all loans, whether they are made to family members, other people or organisations or trusts.

Do not include loans to secure accommodation in retirement villages or aged care.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a document which gives details for each loan (if available).

If the money was loaned to a private trust you will need to complete and return the **Private Trust (Mod PT)** form. If you do not have this form, go to **servicesaustralia.gov.au/forms**

1 Who did you lend the money to?

Date lent	Amount lent
/ /	$

Current balance of loan	Lent by you	Lent by your partner
$	%	%

2 Who did you lend the money to?

Date lent	Amount lent
/ /	$

Current balance of loan	Lent by you	Lent by your partner
$	%	%

If you need more space, provide a separate sheet with details.

55 In the 5 years **before** your application/entry date, have you (and/or your partner) **given away**, or sold for less than their market value, or surrendered a right to any cash, assets, property or income?

Gifting is where you:

- give away assets, or
- transfer them for less than their market value.

For example, if you or your partner:

- give away/transfer shares in a private company
- transfer your shares or units in a trust or company and do not get full market value for them
- give up control of a trust or company – this is a gift of all the assets the trust or company holds
- own a property and sell it for less than it is worth
- buy a car as a present
- have 10% of your wages donated to your church
- forgive a loan
- have to repay a business loan because you guaranteed it
- put money into a family trust and neither you nor your partner control the trust.

It is not gifting if you:

- own a house valued at an amount, but sold it on the open market with the best offer to date, as you could not wait for a higher offer
- have a debt that you cannot repay, so you transfer a car worth about the same to wipe out the debt
- put money into a family trust that you or your partner control.

For more information, refer to page 3 of the notes.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

1 What you gave away or sold for less than its market value (for example, money, car, second home, land, farm)

Date given or sold: / /

What it was worth: $

What you got for it: $

Your share: %

Partner's share: %

Was this gift to a Special Disability Trust (SDT)? No ☐ Yes ☐

Continued

2 What you gave away or sold for less than its market value (for example, money, car, second home, land, farm)

Date given or sold: / /

What it was worth: $

What you got for it: $

Your share: %

Partner's share: %

Was this gift to a Special Disability Trust (SDT)? No ☐ Yes ☐

If you need more space, provide a separate sheet with details.

56 Did you (and/or your partner) **receive payments from outside Australia** at the entry/application date?

Include pensions from other countries, benefits, allowances, superannuation, compensation and war related payments in the type of currency in which it is paid. We will convert this into Australian dollars.

You must include details of pensions, allowances and other payments even if they are not taxable in the country of payment.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a document from the issuing authority or agency which gives details including the amount in the foreign currency (for example, latest pension certificate) for each payment.

1 Type of payment

Country which pays it?

Amount paid (before tax or deductions)

Currency if not AUD

Paid to: You ☐ Your partner ☐

Continued

2 Type of payment

Country which pays it?

Amount paid
(before tax or deductions)

Currency if not AUD

Paid to: You ☐ Your partner ☐

If you need more space, provide a separate sheet with details.

57 Did you (and/or your partner) have an interest in a **business** at the entry/application date?

Include:
- self-employed
- sole trader
- partnership
- sub-contractor.

No ☐ ▶ *Go to next question*

Yes ☐ ▶

You will need to provide:
- your (and/or your partner's) personal income tax return(s)
- business income tax return for the last financial year
- a profit and loss statement, depreciation schedule and any other explanatory notes which form part of the accounts of the business or company.

58 Have you (and/your partner) **had an interest** in a **private trust** in any of the ways detailed below, in the 5 years up to the entry/application date?

You are considered to have an interest in a private trust if **any** of the following apply.

You (and/or your partner) are:
- the appointor
- guardian or principal of the trust
- a trustee

or
- are a shareholder or director of the trustee company
- are a beneficiary or included amongst the categories of beneficiaries of the trust
- are a unit holder
- are owed money by the trust
- are able to benefit from the trust
- can expect the trustee or appointor of a trust to act in accordance with your wishes.

No ☐ ▶ ***Go to 60***

Yes ☐ ▶

If you (and/or your partner) have not previously advised us of this trust, complete and return a **Private Trust (Mod PT)** form.

If you do not have this form, go to **servicesaustralia.gov.au/forms**

59 Is the private trust a **Special Disability Trust** (SDT)?

No ☐

Yes ☐

60 Have you (and/your partner) **had an interest** in a **private company** in any of the ways detailed below, in the 5 years up to the entry/application date?

You are considered to have an interest in a private company if **any** of the following apply.

You (and/or your partner):
- are a shareholder of the private company
- are a director or other office holder of the company
- are owed money by the company
- are able to benefit from the company
- can expect the director of a company to act in accordance with your wishes
- can expect the governing director or majority shareholder to act in accordance with your wishes.

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Was your involvement only as a director and you (and/or your partner) have no shares in or loans to the company?

No ☐ ▶

You will need to complete and return the **Private Company (Mod PC)** form.

If you do not have this form, go to **servicesaustralia.gov.au/forms**

▶ *Go to next question*

Yes ☐ ▶ *Go to next question*

61 Did you (and/or your partner) have any **other assets** (in or outside Australia) that you have not already advised us about on this form at the entry/application date?

Include:
- taxi plates
- time share
- racehorses
- gold bullion
- travel cash passports
- cyber currency (for example, bitcoin)
- collectables (for example, stamps, coins, wine, art, antiques)
- commercial licences (for example, fishing, hunting).

Do not include an account used for funding from the National Disability Insurance Scheme (NDIS).

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide supporting documentation.

1 Description of asset

Current market value | Amount owed

Currency if not AUD | Your share % | Partner's share %

2 Description of asset

Current market value | Amount owed

Currency if not AUD | Your share % | Partner's share %

If you need more space, provide a separate sheet with details.

62 Did you (and/or your partner) receive any **other income** that you have not already listed on this form at the entry/application date?

Include income or money from:
- income from boarders and lodgers
- income protection insurance
- life interests
- other Australian government departments
- other income (for example, royalties)
- other payments from outside Australia
- regular compensation payments or damages
- work (including holiday pay, long service leave, sick pay)
- gratuities (tips).

Do not include for you (and/or your partner and/or your child(ren)) funding from the National Disability Insurance Scheme (NDIS).

No ☐ ▶ *Go to next question*

Yes ☐ ▶ Give details below

Provide a copy of documentation giving details of the type and the amount of the payment.

1 Type of income

Gross amount received

$ per

Currency if not AUD | Your share % | Partner's share %

2 Type of income

Gross amount received

$ per

Currency if not AUD | Your share % | Partner's share %

If you need more space, provide a separate sheet with details.

Questions continue next page ▶

Department of Veterans' Affairs customers

63 Are you (and/or your partner) a veteran or a dependant of a deceased veteran?

No ☐ ▶ Do not continue with these questions as you (and/or your partner) are not a veteran or a dependant of a veteran. ▶ ***Go to 64***

Yes ☐ ▶ *Go to next question*

Did you (and/or your partner) receive a payment of $25,000 from the Australian Government as compensation for internment by:

- North Korean forces during the Korean war, or
- Japanese or Axis forces during World War II?

No ☐ ▶ *Go to next question*

Yes ☐ ▶ The amount of these payments is deducted from the value of your assets if you have received them.
▶ *Go to next question*

Read this before answering the following question.

Qualifying service is service in a war or war like operations where you incurred danger from hostile forces of the enemy.

Do you and/or your partner have **qualifying service**?

No ☐

Yes ☐ ▶ Any Department of Veterans' Affairs disability pension you receive will be exempt from the aged care income assessment.

Person authorised to act on behalf of a Department of Veterans' Affairs client

The Department of Veterans' Affairs clients can nominate a representative for income support payment purposes.

Persons authorised to act on behalf of a client, such as those holding a power of attorney, are able to assist you to meet your obligations under the *Veterans' Entitlement Act 1986* by notifying the Department of Veterans' Affairs of changes on their behalf. However, the obligation to inform the Department of Veterans' Affairs of changes in circumstances that may affect your pension or allowance(s) remains with you.

For income support purposes, the Department of Veterans' Affairs authorised persons have the authority to:

- enquire about your pension
- assist you to meet your obligations to the Department of Veterans' Affairs.

Persons holding a valid financial power of attorney can also be accepted as having the authority to:

- act as a signatory for you
- receive income support related mail on your behalf.

If you wish to be registered as a power of attorney for future contacts with the Department of Veterans' Affairs, provide a certified copy of your power of attorney documentation.

For information about the Department of Veterans' Affairs authorised person arrangements, call the Department of Veterans' Affairs on Freecall™ **1800 555 254**.

Go to next page ▶

Privacy notice

64 **You need to read this**

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to **servicesaustralia.gov.au/privacy**

Declaration for the person the assessment is for

65 **Read** this before continuing.

If you (the person who the assessment is for) are not able to sign this declaration, it should be signed by someone who is authorised to sign on your behalf. The authorised person must also sign question 66.

See 'Person signing on your behalf' section on page 4 of the **Notes**.

I consent to:

- the Department of Health providing Services Australia and the Department of Veterans' Affairs with information about periods, types and levels of care, and assessments for my current and/or previous care, if required to complete my assessment.

I declare that:

- the information I have provided in this form is complete and correct.

I understand that:

- giving false or misleading information is a serious offence.

Signature of the person the assessment is for (or the person signing on their behalf)

Date

/ /

▶ For the **person signing on behalf** of the person the assessment is for continue to the next question.

66 **If someone signs on your behalf**

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Second given name

Address

Postcode

Phone number

Relationship to the person who the assessment is for

Make sure you have read the **Privacy and your personal information** on this page.

Signature of legal guardian, power of attorney or existing nominee

Date / /

When 2 or more people have joint power of attorney, all people with joint power of attorney need to sign. If more than 2 signatures are required, provide a separate sheet with details.

Signature of second legal guardian, power of attorney or existing nominee

Date / /

Which of the following documents are you providing with this form?

- A copy of the power of attorney order ☐
- A copy of the administration order ☐
- A copy of the financial management order ☐
- A letter from a medical professional ☐
- N/A – existing nominee arrangement ☐

Questions continue next page ▶

Checklist

Which of the following forms and documents are you (and/or your partner) providing with this form?

You must provide **copies** of documents. The copies will not be returned.

If you are not sure, check the question to see if you should provide the documents.

Tick all that apply

Details of the sale of your home or details of the transfer or retirement village agreement (If you answered Yes at **question 19**)	☐
Details on value of mobile home/caravan/boat, refundable entry contributions or property (If you answered Yes at **question 20** or **22**)	☐
Statement showing the amount owing for each mortgage (If you answered Yes at **question 20**, **22** or **41**)	☐
Council rates notice (If you answered Yes at **question 23** or **35**)	☐
Documents showing details of the rental income (If you answered Yes at **question 30** or **42**)	☐
Details of each additional property (If you have more than one investment property at **question 34**)	☐
Title deed(s) for each property (If you answered Yes at **question 36**)	☐
Documents of water rights, allocation or licence (If you answered Yes at **question 38**)	☐
Details on amount owing for each loan secured by vehicles (If you answered Yes at **question 45**)	☐
Documents showing balances and details of bank, building society and credit union accounts (If you answered Yes at **question 46**)	☐
Statements or schedules for each fund, including latest council rates notices for any real estate held by SMSF and SAF (If you answered Yes at **question 47**)	☐

Continued

Managed investment certificates or similar document (If you answered Yes at **question 48**)	☐
Share certificates or statement for each shareholding listed on a stock exchange (If you answered Yes at **question 49**)	☐
Investment bond/debenture documents (If you answered Yes at **question 50**)	☐
Details of the funeral bond(s) or funeral investment(s) (If you answered Yes at **question 51**)	☐
Statement for each life insurance policy (If you answered Yes at **question 52**)	☐
Receipts for all lump sum accommodation payments (If you answered Yes at **question 53**)	☐
Money on loan documents (if available) and **Private Trust (Mod PT)** form (if required) (If you answered Yes at **question 54**)	☐
Documents with details of payments by authorities or agencies outside Australia (If you answered Yes at **question 56**)	☐
Personal income tax return(s), business income tax return, a profit and loss statement, depreciation schedule and any other explanatory notes of the business or company (If you answered Yes at **question 57**)	☐
Private Trust (Mod PT) form (if required) (If you answered Yes at **question 58**)	☐
Private Company (Mod PC) form (If required at **question 60**)	☐
Documents with details on 'other' assets (If you answered Yes at **question 61**)	☐
Documents with details on 'other' income (If you answered Yes at **question 62**)	☐
Documents related to a signing on behalf of the person the assessment is for (If signing at **question 66**)	☐

Returning this form

Check that you have answered all the questions you need to answer, supplied all the documents as at the date you permanently moved into an aged care home or as at the date you are lodging this form and you have signed and dated this form.

Return this form to Services Australia unless you receive an income support payment from the Department of Veterans' affairs.

Services Australia
Residential Care
PO Box 7821
Canberra BC ACT 2610

Department of Veterans' Affairs
GPO Box 9998
Brisbane QLD 4001

You should do this before you enter care (if possible) to make sure that your cost of care can be calculated as quickly as possible. If you enter aged care without having an assessment, you could be asked to pay the maximum aged care fees applicable.

If you are authorising a person or organisation to enquire or act on your behalf, complete and return the form on the following pages separately.

STOP If you are receiving a Department of Veterans' Affairs (DVA) means tested payment (see notes page 2 of 4) you should complete and return the **Aged Care Request for a nominee for Department of Veterans' Affairs customers (AC019)** form.

Australian Government
Services Australia

centrelink

Authorising a person or organisation to enquire or act on your behalf

When to use this form

You can use this form to authorise a person or organisation to enquire or act on your behalf for Centrelink payments and services including Aged Care.

STOP

If you or your nominee have your Centrelink payments income managed, call **1800 132 594** before filling in this form.

Protecting you and your information

If you think the access you have provided a person or organisation is being misused, call **132 850** or visit one of our service centres.

If you are affected by family and domestic violence, call **132 850** Monday to Friday, 8 am to 5 pm local time, and ask to speak to one of our social workers or call **000** if you are in immediate danger.

For more information, go to **servicesaustralia.gov.au/domesticviolence**

For more information

TTY

For Child Support, Medicare or more information, go to **servicesaustralia.gov.au/authorisedrepresentative**

If you need to call us, use your regular payment line.

To speak to us in your language, call **131 202**. Call charges may apply.

We can translate documents you need to give us for free.

If you have a hearing or speech impairment, you can contact the **TTY service** Freecall™ **1800 555 677**. A TTY phone is required to use this service.

Type of access you can request

The **information below** may help you to choose the type of access that best suits your needs and will assist you to answer Question 5. There are 4 different types of access that can be requested.

If you want to have a different correspondence nominee to your payment nominee, person permitted to enquire or person permitted to update, you will need to complete a separate form.

Your authorised person or organisations can:	Person permitted to enquire	Person permitted to update	Correspondence nominee	Payment nominee
Ask us questions about your payments or services	✔	✔	✔	✔
Tell us about changes to your circumstances	✘	✔	✔	✘
Respond to requests for information	✘	✔	✔	✘
Come to appointments with you or, if appropriate, on your behalf	✘	✘	✔	✘
Complete and sign forms and statements	✘	✘	✔	✘
Get copies of your letters	✘	✘	✔	✘
Get your Centrelink payments, and use them only for your benefit	✘	✘	✘	✔
View and update your information online	✘	✘	✔	✔
Claim payments and services for you	✘	✘	✔	✘

Identity requirements

Authorised person
Your authorised person will need to provide photo identification, at one of our service centres or agents, from the list at **servicesaustralia.gov.au/identity** For example, a current Australian driver licence or valid passport.

Authorised organisation staff
Staff from your authorised organisation will need to verify their identity details when they create their Provider Digital Access (PRODA) account to access nominee online services. For more information, go to **servicesaustralia.gov.au/proda**

Important information – type of access

When choosing your type of access, you should consider the following:

- you can only have **one** correspondence and **one** payment nominee. These can be different people. You will need to complete a separate form for each
- a person or organisation who is **both a correspondence and payment nominee** can enquire, act and get your Centrelink payments on your behalf
- the person you are authorising cannot have a nominee acting on their behalf
- you can still deal with us, even if you have authorised a person or organisation to assist you
- if you get more money from us than you are entitled to, you will need to repay this. Your nominee is not responsible for repaying this money
- if you have a nominee of the same type already in place, this request will automatically cancel the existing access. Your existing nominee will get a letter telling them of the cancellation.

Person permitted to enquire or update – responsibilities and obligations

A person permitted to enquire or update:

- is required to use the information we give them to assist you to better understand your payment and services.

A person permitted to update:

- can provide us with information to update your payment and services
- must act in your best interest.

A person permitted to enquire or update cannot:

- make decisions for you
- sign forms or statements
- get copies of your letters.

You can authorise more than one person or organisation to be your person permitted to enquire or update.

Correspondence and Payment nominee – responsibilities and obligations

A correspondence nominee is required to:

- let us know of any changes to your circumstances **within 14 days** (**within 28 days** if they are outside Australia)
- respond to notices, including providing requested information and reporting notifiable events. If they do not respond to a notice, it will mean that you (as the customer), did not meet your obligations. If applicable, your payments may be stopped
- act in your best interest
- let us know of any changes that may affect their ability to be your nominee.

A payment nominee is required to:

- use your Centrelink payments for your benefit
- keep records on how the money was spent. We can review these records at any time. If the payment nominee does not provide this information, financial penalties may be imposed on them
- act in your best interest
- let us know of any changes that may affect their ability to be your nominee.

Aged Care matters

Your **person permitted to enquire** can ask questions only, and your **person permitted to update** can ask questions and make updates to your income and assets.

If you are accessing Aged Care services, your **correspondence nominee** will be able to:

- complete and sign forms about your Aged Care costs
- ask questions about your Aged Care costs
- update your income and assets
- get copies of your Aged Care letters.

Your Aged Care payments will go directly to your Aged Care provider.

Australian Government
Services Australia

centrelink

Authorising a person or organisation to enquire or act on your behalf (SS313)

How to complete this form

You can complete this form on your computer, print and sign it.

Part A and **Part C** – collects the customer's details (the person requesting an authorised person or organisation) (pages 1 and 3).

Part B and **Part D** – collects the authorised person or organisation details (pages 2 and 4).

If you have a printed form:

- Print in BLOCK LETTERS using black or blue pen.
- Where you see a box like this ☐ ▶ GO skip to the question number shown.

Privacy notice

You need to read this

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We collect this information to provide payments and services. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to **servicesaustralia.gov.au/privacy**

Part A – Customer details (the person requesting an authorised person or organisation)

1 Your Centrelink Customer Reference Number (if known)

☐☐☐ – ☐☐☐ – ☐☐☐ – ☐

2 Your name

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Second given name(s)

3 Your date of birth

DD / MM / YYYY

4 Has your permanent home or postal address changed since you last told us?

No ☐ ▶ GO *to question 5*

Yes ☐ ▶ Give details below

Date of address change

DD / MM / YYYY

Your permanent home address

Postcode

Your postal address (if different from above)

Postcode

5 Select the type of access you are requesting:

For more information, go to page 1 of the notes.

Tick all that apply

Option 1: Person permitted to enquire ☐

They can ask questions about your payments and services. They cannot make updates to your payments and services.

Option 2: Person permitted to update ☐

They can ask questions about your payments and services and provide information to update your payments and services.

Option 3: Correspondence nominee ☐

They can ask questions about your payments and services, tell us about changes to your circumstances, complete and sign forms/statements, attend appointments with you or on your behalf (if appropriate) and get copies of your letters from us.

Option 4: Payment nominee ☐

They can receive your Centrelink payments on your behalf. Provide your nominee's account details at **question 11**. This is not applicable for aged care.

6 How long do you want this type of access for?

Indefinitely ☐ **or** until DD / MM / YYYY

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Part B – Authorised person or organisation details

7 **Tick one only**

Are you authorising a person or organisation?

Person ☐ GO to Authorised person below

or

Organisation ☐ GO to Authorised organisation below

Authorised person

The authorised person's Centrelink Customer Reference Number (if known)

☐☐☐ – ☐☐☐ – ☐☐☐ – ☐

The authorised person's name

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other

Family name

First given name

Second given name(s)

The authorised person's date of birth

DD / MM / YYYY

Other name(s) the authorised person has been known by

Include:

- name at birth
- name before marriage
- previous married name
- Aboriginal or skin name
- alias
- adoptive name
- foster name.

The authorised person's contact details

Permanent address

Postcode

Postal address (if different from above)

Postcode

Contact phone number

GO *to question 8*

Authorised organisation

The authorised organisation's Centrelink Reference Number (if known)

☐☐☐ – ☐☐☐ – ☐☐☐ – ☐

Trading name of organisation

This is not the contact person. The name of the contact person is to be provided at the end of this question.

Business name of organisation (if different from above)

Australian Business Number (ABN)

This is mandatory when nominating an organisation.

☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

The authorised organisation's contact details

Permanent address

Postcode

Postal address (if different from above)

Postcode

Organisation's email

Name of contact person

Contact phone number

The authorised organisation will need to register their business for Provider Digital Access (PRODA) and Business Hub to use the Nominee Services online.

For more information, go to **servicesaustralia.gov.au/proda**

GO *to question 8*

Part C – Customer declaration and Third Party authorisation

8

Tick one only

I declare that I am able to make my own decisions ☐ GO to **Customer Declaration** below

or

If the customer is not able to make their own decisions ☐ GO to **Third Party authorisation** below

Read this before continuing. Make sure you have read **Privacy and your personal information** on page 1 of this form.

Customer declaration

If the customer is able to make their own decisions but is not able to sign this form, it may be signed by their Power of Attorney.

Tick this box if a Power of Attorney is signing the customer declaration ☐

Name of the Power of Attorney

Provide a copy of the Power of Attorney. If there are multiple attorneys, you will need to copy this page and provide the name and signature of each attorney.

Provide photo identification, such as an Australian driver licence or valid passport.

I declare that the information I have provided in this form is complete and correct.

I authorise the person or organisation named on this form, to deal with Centrelink and Aged Care on my behalf according to the type of access shown on this form.

I understand that:

- this is voluntary and I can cancel this arrangement at any time.
- the type of access may be rejected or cancelled at any time by Centrelink or Aged Care, if the person or organisation is not able to meet their responsibilities and obligations.
- giving false or misleading information is a serious offence.

Your signature

Date DD/MM/YYYY

STOP You have now completed **Part C**.
The **authorised person or organisation** is to complete **Part D**.

GO *to question 9*

Third Party authorisation

If the customer is not able to sign this form due to physical or mental disability and the type of access is in the person's best interest, a third party may sign this section on their behalf.

An appropriate third party may be one of the following and they must provide evidence as outlined below:

- a relevant professional, such as a treating doctor, nurse, case worker or social worker
  - provide a letter or the medical evidence of the customer's incapacity
- the holder of an Enduring Power of Attorney
  - provide a copy of the legal document and medical evidence
  - provide photo identification, such as an Australian driver licence or valid passport
  - if there are multiple attorneys they must all provide a letter or signature with their agreement
- the person or organisation holding a guardianship, financial management or administration order
  - provide a copy of the order.

Name of the third party

Relationship to customer

Address

Postcode

Contact phone number

I declare that:

- the customer is not able to sign this form due to physical or mental disability.
- it is in the customer's best interest to authorise the person or organisation named on this form, to deal with Centrelink and Aged Care on the customer's behalf according to the type of access shown on this form.
- the information I have provided in this form is complete and correct.

Signature of the third party

Date DD/MM/YYYY

STOP You have now completed **Part C**.
The **authorised person or organisation** is to complete **Part D**.

GO *to question 9*

Part D – To be completed by the authorised person or organisation

9 Do you have any of the following:

- Power of Attorney ☐
- Enduring Power of Attorney ☐
- Guardianship ☐
- Financial management/administration order ☐
- None of the above ☐

Provide a copy of any documents ticked above.

10 PASSWORD – For security purposes, we will ask for this password every time you contact us.

Provide a password

The password needs to have 4 to 12 letters or numbers.

Payment nominee only to complete

This is not applicable for Aged Care.

11 Will you be receiving payments on behalf of the customer?

No ☐ ▶ GO *to question 12*

Yes ☐ ▶ Give details below

Complete this if you are a payment nominee.

It may be easier as a nominee to manage the payments by having a separate account. As a nominee you must tell us if this account changes.

Name of bank, building society or credit union

Branch number (BSB)

Account number (this may not be your card number)

Account held in the name(s) of

For organisations only – Group Institution Code (if applicable)

Authorised person or organisation declaration

12 Make sure the authorised person and/or organisation details are correct in **question 7**.

For more information about the responsibilities and obligations as an authorised person or organisation, refer to the **Notes**.

Read **Privacy and your personal information** on page 1 of this form.

I declare that I:

- understand and accept the responsibilities and obligations for the type of access requested in this form.
- will act in the best interest of the customer.

I understand that:

- any personal information I am given access to under this type of access is protected under Commonwealth legislation. I agree to access, use or disclose the information only as authorised by the person to whom the information relates.
- the type of access may be rejected or cancelled at any time by Centrelink or Aged Care, if I am not able to meet my responsibilities and obligations.
- giving false or misleading information is a serious offence.

Signature of the authorised person or organisation

Date

DD / MM / YYYY

Your relationship with the customer (for example, parent, child, guardian).

Checklist

Which of the following documents are you providing with this form?

Provide a copy of the relevant documents. They do not need to be certified and will not be returned to you.

	Tick all that apply
Customer declaration – I am able to make my own decisions **(Question 8)**	
If the Power of Attorney completes the customer declaration, they will need to provide	
• the Power of Attorney document – if there are multiple attorneys, you will need to copy page 3 of the form and provide the name and signature of each attorney	☐
• photo identification, such as an Australian driver licence or valid passport	☐
Third Party authorisation – the customer is not able to make their own decisions **(Question 8)**	
If a third party provides authorisation, they must provide evidence as outlined below	
• a relevant professional, such as a treating doctor, nurse, case worker or social worker	
– a letter or the medical evidence of the customer's incapacity	☐
• the holder of an Enduring Power of Attorney	
– a copy of the legal document and medical evidence of the customer's incapacity	☐
– photo identification, such as an Australian driver licence or valid passport	☐
– if there are multiple attorneys, they must all provide a letter or signature with their agreement	☐
• the person or organisation holding a guardianship, financial management or administration order	
– a copy of the order	☐
If your authorised person or organisation holds any of the following, they will need to provide a copy of the documents (Question 9)	
• Power of Attorney	☐
• Enduring Power of Attorney	☐
• Guardianship	☐
• Financial management/administration order	☐

Stopping or changing your type of access

You can cancel or change your nominee's type of access at any time, unless it is a court, tribunal, guardianship or an administration appointed arrangement.

To cancel the type of access:

- call us – go to **servicesaustralia.gov.au/phoneus**
- use your **online account** to cancel or change your correspondence and/or payment nominee at any time
- write to us – go to **servicesaustralia.gov.au/contactus**

If you cancel your nominee a letter will automatically be sent to you and your nominee.

Centrelink may review, reject or cancel your type of access at any time. This includes if the person or organisation is not able to meet their responsibilities and obligations.

Returning this form

Return this form and any supporting documents:

- **online** (excluding identity documents) using your Centrelink online account. For more information, go to **servicesaustralia.gov.au/centrelinkuploaddocs**
- in person at one of our service centres, if you are not able to use your Centrelink online account.
- post to: Services Australia
PO Box 7800
CANBERRA BC ACT 2610
- fax to: **1300 786 102**