

Pensioner water subsidy application

Applicant information			
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr
First/given name			Surname
Type of concession card	<input type="checkbox"/> Pensioner <input type="checkbox"/> Repatriation Health Card (Gold Card only)		
Concession card number			
Applicant 2 (if more than one registered owner of property)			
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr
First name			Surname
Type of concession card	<input type="checkbox"/> Pensioner <input type="checkbox"/> Repatriation Health Card (Gold Card only)		
Concession card number			
Contact details			
Applicant 1			
Postal address			
		Postcode	
Phone no		Mobile	
Email address			
Applicant 2			
Postal address			
		Postcode	
Phone no		Mobile	
Email address			
Property details			
Allconnex Water account number			
Address			
		Postcode	
When did you start living at the property?			
Is the property the principal place of residence for the applicant/s?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is the property entirely owned by the applicant/s?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Property details (cont.)

If the property is not entirely owned by the Applicant/s, complete "Other owners' details" below.

Are you a Life Tenant of the property?

Yes No

Other owner/s' details (if applicable)

Name	
Ownership share	
Relationship to applicant/s	

Required documents

- For **all** applications, please attach a copy of the concession (pension) card for **all** applicants. Do not send an original. Please photocopy the front and reverse side of each card.
- If a Life Tenant of the property, please attach a certified copy of the legal documents, eg. creating the life tenancy.

Privacy declaration

I/ We consent to Allconnex Water or its authorised Service Provider disclosing my /our personal information, including the information contained on this form, to the Queensland Government's Department of Community Services, Centrelink, the Department of Veterans Affairs or other Commonwealth Government agencies or departments for the sole purpose of obtaining concessional entitlements.

I/We authorise the Queensland Government's Department of Community Services, Centrelink, and the Department of Veterans Affairs or other Commonwealth Government agencies or departments to confirm the receipt of a Centrelink or Department of Veterans Affairs' benefit.

I/We understand that this consent, once signed, is effective only for the period I/we are a customer of Allconnex Water. It is also understood that Allconnex Water may periodically use my/our personal information to confirm whether or not I/we continue to be eligible to receive the Pensioner Water Subsidy.

Signature of applicant 1		Date	
Signature of applicant 2		Date	

Privacy statement: Allconnex Water is collecting your personal information in accordance with the Water Supply (Safety and Reliability) Act 2008 in order to process the required documentation. This information will only be used by authorised Allconnex Water staff and their Council partners to ensure our records are accurate. Your information will not be given to any other person or agency without your permission, or as required by law.