



Australian Government

Department of Health and Ageing

Permanent Residential Aged Care Request for an Assets Assessment

This form is used to provide the necessary information so that the net value of your assets can be assessed by Centrelink or the Department of Veterans' Affairs (DVA). The results of this assessment will assist in working out the amount of accommodation bond or accommodation charge that an aged care provider can ask you to pay.

IMPORTANT: You may not need to fill in this form, particularly if you are moving from one aged care service to another.

Please read page 3 of the accompanying *Information Booklet* to work out whether you need to have an assets assessment. You can also call the Aged Care Information Line on 1800 500 853 (free call) for information about whether you need to have an assets assessment.

This form is **not** an application for Financial Hardship Assistance. For information about Financial Hardship Assistance please call the Aged Care Information Line on 1800 500 853 (free call).

Returning the form:

- Please return the completed form to Centrelink or DVA. Full instructions on where to send it are on the back page of this form.
- Please do not send this form to the Department of Health and Ageing.

Important information about this form

'Skip' instructions

Depending on your answer to certain questions, you may be given a 'Skip' instruction. 'Skip' instructions allow you to skip past questions that are not relevant to you.

You MUST follow all 'Skip' instructions that apply to you.

'Skip' instructions generally follow a Yes or No answer box and look like this:

No	<input type="checkbox"/>	▶	Skip to A6
Yes	<input type="checkbox"/>		

If there is **no 'Skip'** instruction it means you need to **continue to the next question**.


Do you need to complete all sections of this form?

Depending on your circumstances, you may not need to complete all sections of this form.

Some sections start with an 'introductory question' which looks like the one below. You must answer each of these introductory questions whether you think the section applies to you or not.


<i>Do you need to complete this section?</i>			
Example of an introductory question leading in to each Section throughout the form. Do you need to complete this section?			
No	<input type="checkbox"/>	▶	Skip to Section X — you do NOT need to complete this section
Yes	<input type="checkbox"/>	▶	You do need to complete this section — please go to the next question

Further information

 This information symbol and the accompanying text indicates where there is further information contained in the *Information Booklet*.

Attaching documents

Depending on your answers you may be required to provide additional documentation with your form. If you do need to attach documents you will be told what to attach in a box like this:

 Please attach photocopies of documentation requested
--

You do not need to provide the original documents — a photocopy is adequate.

Privacy

The legal authority for the use and disclosure of the information collected in this form is set out on page 7 of the *Information Booklet*.

Section A Personal details

Are you sure you need to complete this form?

Please **do not complete this form** until you have read page 3 of the accompanying *Information Booklet* and are certain that you need an assets assessment.

You can also call the Department of Health and Ageing on 1800 500 853.

A1 Your full name (the person the assessment is for)

Title (e.g. Mr, Mrs, Miss, Ms)

Surname or family name

Given names

A2 Sex

Male

Female

A3 Date of birth

A4 Home address

If you are already in residential aged care or are in a hospital awaiting entry to a residential aged care home, you should write down your **previous** home address.

<input type="text"/>	
<input type="text"/>	
STATE	POSTCODE

A5 Address for correspondence (if different from above)

<input type="text"/>	
<input type="text"/>	
STATE	POSTCODE

If you receive an income **support payment** (for example, Age Pension or Service Pension) from Centrelink or DVA, do you want Centrelink or DVA to use this address for income support correspondence?

i 'Income support payments' are defined on page 2 of the *Information Booklet*.

No Yes Not applicable

A6 Contact phone numbers

Daytime

STD

Mobile

A7 Do you have a current Aged Care Assessment Team (ACAT) **approval** for entry into permanent residential aged care?

No Yes

A8 Are you currently receiving an **income support payment** from Centrelink or DVA?

i 'Income support payments' are defined on page 2 of the *Information Booklet*.

No Yes ► Which agency do you receive the payment from?

Centrelink ► Type of payment received

Centrelink Customer Reference Number

DVA ► Type of payment received

DVA file number

A9 Are you currently receiving care in a **hospital**?

No Yes ► Name of the hospital

A10 Are you currently **residing** in permanent residential aged care?

No Yes ► Name of the home

Phone number

Have you paid an accommodation bond?

No Yes ► What is the current balance? \$

Note: Please see page 3 of the Information Booklet to see if it is necessary for you to have an assets assessment.

A11 Are you requesting this assets assessment for (*tick one box only*):

A **future** admission to an aged care home

A **move** to a different aged care home

► *Note: You need to complete this form based on your current circumstances.*

Your **current admission**

A **previous admission**

► Date of that admission

Note: You need to complete this form based on your circumstances at the date of that admission.

A12 Do you have a **partner**?

i 'Partner' is defined on page 5 of the *Information Booklet*.

No ► **Skip to A18**

Yes

A13 Your partner's full name:

Title (e.g. Mr, Mrs, Miss, Ms)

Surname or family name

Given names

A14 Your partner's sex Male Female

A15 Your partner's date of birth / /

A16 Your partner's residential address

STATE	POSTCODE

A17 Is your partner currently receiving an **income support payment** from Centrelink or DVA?

i 'Income support payments' are defined on page 2 of the *Information Booklet*.

No Yes ► Which agency does your partner receive the payment from?

Centrelink ► Type of payment received

Centrelink Customer Reference Number

DVA ► Type of payment received

DVA file number

A18 Are you (and/or your partner) a veteran or dependant of a deceased veteran?

No Yes ► 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? No Yes

Japanese or Axis forces during World War II? No Yes

If you (and/or your partner) received one of these payments, the compensation payment amount will be **deducted** from the value of your assets.

A19 Do you want to provide an estimate of the net market value (resale value) of your (and your partner's, if applicable) household contents and personal effects?

Note: Even if Centrelink or DVA already has information on the value of your household contents and personal effects, it is important that you update this information to take account of any depreciation or increase in value.

No ► The value of your household contents and personal effects will be taken to be \$5,000.
Skip to Section B

Yes ► What is the estimated net market value* of your (and your partner's, if applicable) household contents and personal effects?

This estimate may be higher or lower than \$5,000.

\$

* The market value is **NOT the replacement or insured value**, it is the amount you would get if you sold the item(s).

Section B Contact person

Do you need to complete Section B?

Do you want to nominate someone (other than yourself) whom Centrelink or DVA can contact about this aged care assets assessment?

No **Skip to Section C** — you **do NOT** need to complete this section.

Yes You **do** need to complete this section — please go to question B1 below.

B1 Who do you want to nominate?

My **partner** Your partner's daytime phone number

STD	
-----	--

Mobile

--

Skip to Section C — you have completed this section.

Someone else Please give their details

Title (e.g. Mr, Mrs, Miss, Ms)

--

Surname or family name

--

Given names

--

Address for correspondence with contact person

STATE	POSTCODE

Daytime phone number

STD	
-----	--

Mobile

--

Their relationship to you (e.g. son, friend)

--

Note: If you would like to nominate more than one contact person, please provide a separate sheet with the other person's details.

Section C Your home

Do you need to complete Section C?

Have you (and/or your partner):

- owned or part-owned a home (including a mobile home or a unit in a retirement village) in the past 2 years

OR

- lived in a retirement village unit under another arrangement in the past 2 years, for example, you paid an amount of money under a licensing agreement, or other agreement, for the right to live there (an entry contribution)?

No ► **Skip to Section D** — you **do NOT** need to complete this section.

Yes ► You **do** need to complete this section — please go to question C1 below.

i Page 4 of the *Information Booklet* tells you how your home is treated for the assets assessment.

C1 In the past 2 years, have you (and/or your partner) lived in a **retirement village**?

i Please refer to page 5 of the *Information Booklet* for information about Retirement village homes.

No

Yes ► **Skip to C22**

C2 Do you (and/or your partner) **currently** own (or part-own) a home?

Note: Also answer 'Yes' to this question if you (and/or your partner) are paying off a mortgage on your home or if your home is owned by a Private Trust or a Private Company that you (and/or your partner) control.

No ► **Skip to C6**

Yes

C3 Is your home a **mobile** home such as a caravan or a boat (or similar dwelling)?

No ► **Go to C4**

Yes ► What is the current market value of the home?

\$



Please attach documentation indicating the current market value of the home.

Do you have a **partner** who lives in the mobile home?

No ► **Skip to C30**

Yes ► **Skip to Section D** — you have completed this section.

C4 Do you have a **partner** who lives in your home?

No **Skip to C8**

Yes

C5 Is the **land** on which your home stands more than 2 hectares (5 acres)?

No **Skip to Section D** — you have completed this section.

Yes **Skip to C8**

C6 *Note: If you (and/or your partner) have owned or part-owned a home (including a mobile home) in the past 2 years, but you do not own it now, the value of your interest in that former home is used to work out if you are eligible for government assistance.*

Did you (and/or your partner) **sell** your home in the past 2 years?

No **Go to C7**

Yes Date the home was sold

Did you have a partner at the time the home was sold?

No Yes

What was the total amount you (and your partner, if applicable) received?

\$

What was the total amount you (and your partner, if applicable) incurred in finalising the sale of the home, for example, a mortgage, taxes?

\$



Please attach documentation verifying the:

- sale price of the home, for example, a solicitor's settlement letter or sale contract, and
- the amount of expenses incurred (if any) in finalising the sale of the home.

Skip to Section D — you have completed this section.

C7 Did you (and/or your partner) **transfer the title** of your home in the past 2 years?

No **Skip to Section D** — you have completed this section.

Yes Date the title was transferred

Did you have a partner at the time the title of the home was transferred?

No Yes

What was the market value of your (and your partner's, if applicable) interest in the home at the time of transfer?

\$



Please attach documentation verifying the value of the home, for example, a solicitor's settlement letter or transfer document.

Skip to Section D — you have completed this section.

Details for valuation of your home

C8 What is the **address** of your home?

STATE	POSTCODE

C9 What **type** of property is your home?

House

Part of a farming property

Townhouse (including duplex/triplex)

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

Unit/flat ► How many units/flats are in the block?

Other ► Please specify

C10 What is the **share** of ownership (as indicated on the property title)?

Note: For the purposes of this question, disregard any financial interest held by a financial institution in the form of a mortgage.

Self %

Partner %

Others %

C11 What is the **legal description** (lot/section number) of the land?

Note: This information can be found on a rates notice.

Lot

Section

C12 What is the **area/dimensions** of the land?

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

Square metres, or

Hectares, or

Acres

C13 What is your **estimate** of the **current market value** of the property, including land and buildings?

Note: You do not need to have the property professionally valued. We may have an approved government valuer do this at no cost to you.

\$

C14 What are the **details** of your home?

Number of bedrooms

Number of bathrooms

Number of garages

Approximate age of the home

 YEARS

Floor area

 SQUARES OR SQUARE METRES

Your assessment of the condition of the home:

Good

Fair

Poor

Type of construction: Exterior (e.g. brick, timber, fibro)

Roof (e.g. iron, tiled)

Is there anything that may affect the value of the home
(e.g. swimming pool, new kitchen, no off-street parking)?

C15 Is your home part of a **farm property**?

No



Skip to C30

Yes

Farm information

This information is needed by the valuer to verify the value of the property in order to determine the value of the home on it.

C16 What is the farm property **primarily** used for (e.g. grazing, wheat, hobby)?

C17 Is the farm property currently **operational/viable**?

No Yes

C18 Is it possible to **subdivide** the farm property or farm home?

No Yes

C19 Are there any **improvements** on the farm property?

No Yes ▶ Please complete the following table

Type	Number	Description	Age (years)
Hay shed			
Machinery shed			
Shearing shed			
Grain shed			
Silos			
Cattle/sheep yard			

C20 Is there any **fencing** on the property?

No Yes ▶ Type

Condition

C21 Please list any other **constructions** located on the property (e.g. workers' quarters, manager's house)

Skip to C30

Retirement village home

C22 Do you currently live in a **retirement village**?

No ►

Skip to C26

Yes

C23 Do you have a partner living with you in the retirement village?

No

Yes ►

Skip to Section D — you have completed this section.

C24 What amount will be paid to you (and/or your partner) when you leave the retirement village (from the sale of the unit, or refund of amount paid under the licensing agreement, or refund of entry contribution)?

\$



Please attach supporting documentation showing the amount payable to you

C25 Do you have an outstanding loan which was incurred to purchase the unit or for the right to live in the retirement village?

No ►

Skip to Section D — you have completed this section.

Yes ► What is the amount owing on the loan?

\$



Please attach a copy of the most recent statement for the loan

Skip to Section D — you have completed this section.

C26 When did you leave the retirement village?

/ /

C27 Did you have a partner living with you in the retirement village?

No

Yes ► Is your partner still living in the retirement village?

No


Yes ►

Skip to Section D — you have completed this section.

C28 What amount has been, or will be, paid to you (and/or your partner) as a result of your departure from the retirement village?

Note: This could be an amount from the sale of the unit, a refund of an amount paid under the licensing agreement, or a refund of an entry contribution. If you had a partner at the time this amount became payable, your share of this amount will be 50% of the total.

\$


 Please attach supporting documentation showing the amount payable

When was it paid to you, or when is it due to be paid? /

C29 At the time you left the retirement village, did you have an outstanding loan which was incurred to purchase the unit or for the right to live in the retirement village?

No Yes ► What was the amount owing on the loan?

\$

 Please attach a copy of the most recent statement for the loan

Occupants of your home

This information is needed to decide if your home can be exempted from the assets assessment.

C30 Do you have a **dependent child** who lives in your home?

i 'Dependent child' is defined on page 6 of the *Information Booklet*.

No Yes ▶ Please give details of your dependent child

Surname or family name

Given names

Date of birth

/	/	

C31 Have you had someone who has **cared for you** who has lived in your home for the **past 2 years** and is currently **eligible** to receive an income support payment from Centrelink or the Department of Veterans' Affairs (for example, Age Pension or Service Pension)?

Note: A Carer's Allowance is not an income support payment.

No Yes

C32 Has a **close relation** (either your mother, father, sister, brother, child or grandchild) lived in your home for the **past 5 years** who is currently **eligible** to receive an income support payment from Centrelink or the Department of Veterans' Affairs (for example, Age Pension or Service Pension)?

No Yes

C33 If you have answered **Yes** to either (or both) **C31** or **C32**, it is necessary for Centrelink or DVA to verify your carer's or close relation's occupation of your home and their eligibility to receive an income support payment.

Consent by carer or close relation

I consent to Centrelink or the Department of Veterans' Affairs using information collected from me for the purpose of determining my eligibility for an income support payment for the additional purpose of determining under the *Aged Care Act 1997* the value of the applicant's assets, which may affect the amount the applicant can be asked to pay an aged care home for accommodation.

Signature of carer or close relation



Date

Surname or family name

Given names

Date of birth

Centrelink or DVA reference number

Relationship to applicant

Daytime phone number

STD

Mobile

		/	/		
/	/				
		/	/		
		STD			

Section D Debts

Do you need to complete Section D?

Do you (and/or your partner) have any debts that you currently owe, for example mortgages, loans and credit cards?

Do not include any:

- future or anticipated debts, or
- debts to be deducted from the sale price of a retirement village unit, or an entry contribution refund, that you have already included in Section C.

No ► **Skip to Section E** — you **do NOT** need to complete this section.

Yes ► You **do** need to complete this section — please go to question D1 below.

Note: Some debts are assessed differently for aged care purposes than they are for pension purposes. Under the assets assessment, debts, charges and encumbrances on assets that you (and/or your partner) hold will be **deducted** from the net value of your assets.

D1 Do you (and/or your partner) have any **mortgages**?

No Yes ► Please give details below

Address of property secured by the mortgage	Amount owing
	\$
	\$
	\$
	\$



Please attach a copy of the most recent statement for each mortgage

D2 Do you (and/or your partner) have any **motor vehicle/boat/caravan loans**?

No Yes ► Please give details below

Details of the motor vehicle/boat/caravan secured by the loan	Amount owing
	\$
	\$
	\$
	\$




Please attach a copy of the most recent statement for each loan

D3 Do you (and/or your partner) have any **outstanding credit card debts or other personal loans**?

No Yes ► Please give details below


Creditor	Amount owing	Your share	Partner's share
	\$	%	%
	\$	%	%
	\$	%	%
	\$	%	%

 Please attach a copy of the most recent statement for each loan

D4 Do you (and/or your partner) have any **other debts** not already listed on this form, for example, household and medical bills owing?

No Yes ► Please give details below

Creditor	Amount owing	Your share	Partner's share
	\$	%	%
	\$	%	%
	\$	%	%
	\$	%	%

 Please attach supporting documentation

Section E Other assets (including investment properties)

Do you need to complete Section E?

Do you currently receive an income support payment from Centrelink or the Department of Veterans' Affairs (for example, Age Pension or Service Pension)?

No ► You **must** complete this section — please go to question E1 below.

Yes ► Centrelink or DVA already have details about your (and your partner's) assets.
Do you need to advise Centrelink or DVA of any changes?

Note: If the information held by Centrelink or DVA is not up to date, it could result in an incorrect assessment.

No ► **Skip to Section F** — you **do NOT** need to complete this section.

Yes ► You only need to answer those questions in Section E where you need to give new information to Centrelink or DVA.

Note: If you are regarded as **blind** for income support payment purposes and you have not been means tested by Centrelink or DVA, you **must** complete this section.

Note: If you are **already in permanent care** and this assessment is for your current admission, any details you provide in this section should reflect your circumstances on the day you entered care.

If you **need more space** for any of your information, please attach a separate sheet with the details.

E1 Do you (and/or your partner) have any **deposits with financial institutions?**

This includes bank accounts, building society/credit union accounts, term deposits or money held in development funds.

Note: If you receive a payment from Centrelink or DVA, please include details of the account your payment is paid into.

No Yes ► Please give details below

Name of institution	Account or term deposit number	Account balance	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%




Please attach proof of all account balances (e.g. copies of ATM slips, statements, passbooks)

E2 Do you (and/or your partner) have any **investment bonds or debentures**?

No Yes ► Please give details below


Type of investment	Name of company	Current amount invested	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Please attach a document which gives details for each investment

E3 Do you (and/or your partner) **have money on loan** to anyone including family members, relatives and friends?

No Yes ► Please give details below

Who is it on loan to? (e.g. son, daughter)	Date loaned	Amount owing	% loaned by you	% loaned by partner
	/ /	\$	%	%
	/ /	\$	%	%
	/ /	\$	%	%
	/ /	\$	%	%
	/ /	\$	%	%

 Please attach a document which gives details of the loan, if available

E4 On or after 10 May 2006, have you (and/or your partner) **given away, sold for less than their market value, or surrendered** a right to any cash, assets, property or income?

This includes forgiven loans and shares in private companies.

No Yes ► Please give details below

What you gave away or sold for less than its market value (e.g. money, car, land, farm)	Date given away or sold	What it was worth	What you got for it	Gift made by:	
				You	Partner
	/ /	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
	/ /	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
	/ /	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
	/ /	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
	/ /	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>

E5 Do you (and/or your partner) own any **shares, options, rights or convertible notes**?

No Yes ▶ Please give details below

Name of company	Number of shares	Your share	Partner's share
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%
		%	%


 Please attach a copy of the latest statement for each share holding

E6 Do you (and/or your partner) have any **managed investments**?

This includes unit and account based trusts, listed trusts, master trusts, insurance and friendly society bonds.

No Yes ▶ Please give details below


Name of product	Policy number	Number of units	Your share	Partner's share
			%	%
			%	%
			%	%
			%	%
			%	%

 Please attach documents which show details for each investment (e.g. certificate with the number of units or account balance)

E7 Do you (and/or your partner) have any **life insurance policies** that can be cashed in?

No Yes ▶ Please give details below


Name of insurance company	Policy number	Surrender value	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Please attach a copy of the policy document and the latest statement for each policy

E8 Do you (and/or your partner) have any **superannuation assets** from which lump sums can be withdrawn?

No Yes ► Please give details below


Name of institution/ fund manager	Name of fund	Account balance	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Please attach a copy of the latest statement for each fund

E9 Do you (and/or your partner) have any income stream products, purchased **before 20 September 2007**, from which lump sums can be withdrawn?

No Yes ► Please give details below


Name of institution/ fund manager	Name of fund	Account balance	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Please attach a copy of the latest statement for each fund

E10 Do you (and/or your partner) have any income stream products purchased **on or after 20 September 2007**?

No Yes ► Please give details below

Name of institution/ fund manager	Name of fund	Account balance	Your share	Partner's share
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%
		\$	%	%

 Please attach a copy of the latest statement for each fund

E11 Do you (and/or your partner) own any **motor vehicles, boats, caravans or trailers**?

No Yes ► Please give details below


Make	Model	Year	Market value*	Your share	Partner's share
			\$	%	%
			\$	%	%
			\$	%	%
			\$	%	%
			\$	%	%

* The current market value of your vehicle is the amount you would get if you sold it. It is not the insured or replacement value. If you have an outstanding loan or debt against the vehicles, please make sure you have provided the loan/debt information in Section F.

E12 Do you (and/or your partner) have an interest in a **business** (this includes a **farm**)?

No Yes ► What is your estimate of the total value of the interest? \$

(For a farming business, the value of grazing animals, produce, crops, plant and machinery should be included.)

 Please attach a recent balance sheet which states your (and/or your partner's) current interest in the business.

E13 Do you (and/or your partner) have a current interest in a **private company**?

No Yes ► What is your estimate of the total value of the interest? \$

You will be asked to provide more details at a later date.

Note: 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, 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 major shareholder to act in accordance with your wishes.

E14 Do you (and/or your partner) have a current interest in a **private trust**?

No

Yes

▶ What is your estimate of the total value of the interest?

\$

You will be asked to provide more details at a later date.

Note: 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
- are a trustee
- are a shareholder or director of the trustee company
- are a beneficiary or included among the categories of beneficiaries
- 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.

E15 Do you (and/or your partner) have any special **collections** such as stamps, art work or antiques?

No

Yes

▶ Please give details below

What is your estimate of the total value of these collections?

\$



Please attach copies of valuation certificates or insurance valuations (if available).

E16 Do you (and/or your partner) have any **other assets** (apart from real estate) not declared elsewhere on this form?

No

Yes

▶ What is the nature of these assets/investments

What is your estimate of the value of these assets/investments?

\$



Please attach supporting documentation (if available)

E17 Do you (and/or your partner) have any **real estate properties other than your home**?

No

▶ **Skip to Section F** — you have completed this section.

Yes

▶ How many real estate properties do you (and/or your partner) own or have an investment in?

Please note: If you have more than one investment property, you will need to photocopy and complete pages 23 – 25 for each property.

Investment property

Remember — If you have more than one investment property, you will need to photocopy and complete pages 23 – 25 for each property.

E18 What is the **address** of the property?

STATE	POSTCODE

E19 What **type** of property is your investment property?

Vacant land

House

Townhouse (including duplex/triplex)

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

Unit/flat ► How many units/flats in block?

Farm

Hobby farm

Retail premises

Commercial premises

Industrial premises

Other ► Please specify

E20 What is the **share** of ownership (as indicated on the property title)?

Note: For the purposes of this question, disregard any financial interest held by a financial institution in the form of a mortgage.

Self %

Partner %

Others %

E21 What is the **legal description** (lot/section number) of the land?

Note: This information can be found on a rates notice.

Lot

Section

E22 What is the **area/dimensions** of the land?

Note: You do not need to answer this question if the property is a unit or flat.

Square metres, or

Hectares, or

Acres

E23 What is your **estimate** of the **current market value** of the property, including land and buildings?

Note: You do not need to have the property professionally valued. We may have an approved government valuer do this at no cost to you.

E24 What are the **details** of the main building?

There are no buildings on the property

Number of bedrooms

Number of bathrooms

Number of garages

Approximate age of the home YEARS

Floor area SQUARES OR SQUARE METRES

Your assessment of the condition of the home: Good Fair Poor

Type of construction: Exterior (e.g. brick, timber, fibro)

Roof (e.g. iron, tiled)

Is there anything that may affect the value of the home (e.g. swimming pool, new kitchen, no off-street parking)?

E25 Is the property a **farm/hobby farm**?

No **Skip to E32**

Yes

Investment property — Farm information

E26 What is the farm property **primarily** used for? (e.g. grazing, wheat, hobby)

E27 Is the farm property currently **operational/viable**?

No Yes

E28 Is it possible to **subdivide** the farm property or farm home?

No Yes

E29 Are there any **improvements** on the farm property?

No Yes ▶ Please complete the following table

Type	Number	Description	Age (years)
Hay shed			
Machinery shed			
Shearing shed			
Grain shed			
Silos			
Cattle/sheep yard			

E30 Is there any **fencing** on the property?

No Yes ▶ Type
Condition

E31 Please list any other **constructions** located on the property
(e.g. workers' quarters, manager's house)

Rental from investment property

This information is needed by the valuer to verify the value of your investment property.

E32 Is rental income **received** from the property?

No ▶ **Skip to Section F** — you have completed this section.
Yes

E33 How many **weeks per year** is the property rented for?

E34 What is the **gross amount** of rent received for the property?

 PER

E35 What is your **estimate** of the **annual outgoings** (e.g. rates, maintenance)?

E36 Does the **tenant** pay all or part of the annual outgoings?

All Part ▶ How much per year?

Section F Document checklist

You may have been asked to provide documents (copies only) to support your answers to some of the questions. Please complete this checklist to make sure you have attached all the relevant documents.

Section C – Your home

- C3** Current market value of mobile home – documents indicating the current market value
- C6** Sale of the home – supporting documentation such as a solicitor’s settlement letter or the sale contract, and (if applicable) documents verifying the amount of expenses incurred in finalising the sale
- C7** Transfer of the home – supporting documentation such as a solicitor’s settlement letter or transfer document
- C24** Amount payable on departure from retirement village – supporting documentation showing the amount
- C25** Outstanding loan for retirement village unit or entry contribution – most recent statement
- C28** Amount paid or payable on departure from retirement village – supporting documentation showing the amount
- C29** Outstanding loan for retirement village unit or entry contribution – most recent statement

Section D – Debts

- D1** Mortgages – most recent statements
- D2** Motor vehicle/boat/caravan loans – most recent statements
- D3** Credit card debts or other personal loans – most recent statements
- D4** Other debts – supporting documentation

Section E – Other assets

- E1** Deposits with financial institutions – proof of all account balances such as ATM slips, statements, passbooks
- E2** Investment bonds or debentures – supporting financial statements
- E3** Money on loan – supporting documentation
- E5** Shares, options, rights, convertible notes – supporting financial statements
- E6** Managed investments – supporting financial statement showing the current unit holdings and account balance
- E7** Life insurance policies – most recent policy schedules
- E8** Superannuation assets – most recent statements
- E9** Income streams, purchased before 20 September 2007, from which lump sums can be withdrawn – most recent statements
- E10** Income streams purchased on or after 20 September 2007 – most recent statements
- E11** Motor vehicles, boats, caravans or trailers – supporting documents such as an insurance policy schedule
- E12** Business – recent balance sheet
- E15** Special collections – valuation certificates or insurance valuations
- E16** Other assets – supporting documentation

Section G Declaration and consents

G1 I **declare** that the information in this form is complete and correct. I also understand that giving false or misleading information is a serious offence.

I **consent** to the Department of Health and Ageing providing Centrelink or the Department of Veterans' Affairs (DVA) with information about entry dates, levels of care, and previous aged care assets assessments, in relation to my current and/or any previous entry to aged care, if required to complete my assets assessment.

I **consent** to Centrelink or DVA:

- using information which has been collected from me for the purpose of determining my eligibility for an income support payment, for the additional purpose of completing my aged care assets assessment under the *Aged Care Act 1997* to determine the amount of subsidy payable to an aged care home for my accommodation and the maximum amount I could be asked to pay the home for my accommodation
- using information collected from me for the purpose of completing my aged care assets assessment for the additional purpose of updating information held by Centrelink or DVA in relation to my eligibility for an income support payment
- disclosing personal information about me to my nominated contact person (if any)
- disclosing information collected from me for the purpose of completing my aged care assets assessment to the Department of Health and Ageing and Medicare Australia (acting on behalf of the Department of Health and Ageing) in order to calculate the amount of subsidy payable to my aged care home for my accommodation and the maximum amount of accommodation charge I could be asked to pay the home (if applicable)
- advising aged care homes, to which I have applied to become a resident, of the progress of my assets assessment, if they request this information from Centrelink or DVA. My consent does not include advising aged care homes about the outcome of my assessment.

Signature of applicant
(or person authorised to sign)



Date

G2 If this form was signed on **behalf** of the applicant, please provide the authorised person's details

Title (e.g. Mr, Mrs, Miss, Ms)	<input type="text"/>
Surname or family name	<input type="text"/>
Given names	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	STATE <input type="text"/> POSTCODE <input type="text"/>
Daytime phone number	STD <input type="text"/>
Mobile	<input type="text"/>
Relationship to applicant	<input type="text"/>

 Please attach the authorisation (tick whichever is applicable):

A copy of the power of attorney

A copy of the administration order or financial management order

Note: If you have any queries about how to answer the questions on this form, please contact Centrelink or DVA.

Centrelink 1800 227 475

DVA 133 254

If calling from regional Australia phone 1800 555 254

Where to post the completed form and supporting documentation

Centrelink

Post your form and supporting documentation to **Centrelink** if:

- you receive an **income support payment** (such as an Age Pension or a Disability Support Pension) from Centrelink, or
- you **do not** receive an income support payment from either Centrelink or the Department of Veterans' Affairs.

All States/Territories	Centrelink Aged Care Assets Assessments PO Box 1564 MOORABBIN VIC 3189
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Department of Veterans' Affairs (DVA)

Post your form and supporting documentation to the **DVA office in your State or Territory** if you receive an **income support payment** (such as a Service Pension or an Income Support Supplement) from DVA.

ACT/NSW	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 SYDNEY NSW 2001
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QLD	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 BRISBANE QLD 4001
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SA/NT	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 ADELAIDE SA 5001
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TAS	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 HOBART TAS 7001
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VIC	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 MELBOURNE VIC 3001
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WA	Department of Veterans' Affairs Aged Care Assets Assessments GPO Box 9998 PERTH WA 6001
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