



ACT
Government

Asbestos Response
Taskforce

Loose Fill Asbestos Insulation Eradication Scheme **Application for Lessor Assistance Grant (Eligible Lessors)**

This form should not be used if you are an owner/occupier or former tenant of an affected property and wish to apply for assistance. There are separate application forms you may be required to complete.

This application is made under the Loose Fill Asbestos Insulation Eradication Scheme. All applications will be assessed in accordance with *The Loose Fill Asbestos Insulation Eradication Scheme – Lessor Assistance Grant Policy*. This application cannot be processed unless it is signed by all owners and lodged with all sections completed.

You must also supply a copy of the residential tenancy agreement effective as at 18 February 2014 and evidence of lodgement of the bond for the tenancy with your application, which cannot be processed without this documentation. You must also provide signed statutory declaration.

You may be required to provide additional information to enable the application to be processed.

I/we wish to apply for a Lessor Assistance Grant for the affected property	
Part 1 – Applicant details	
Name(s): <i>List all registered owners of the affected property</i>	
Address of affected property:	
Postal address of applicant:	
Telephone(s):	
Email:	
Preferred method of contact: <i>Please mark as appropriate</i>	<input type="checkbox"/> Email <input type="checkbox"/> Telephone <input type="checkbox"/> Post
I am/ we are the: <i>Please mark as appropriate</i> <i>You must be the owner of the affected property on each of the identified dates to be eligible to apply for the Lessor Assistance Grant</i>	<input type="checkbox"/> owner of the affected property as at 18 February 2014 <input type="checkbox"/> owner of the affected property as at 28 October 2014 <input type="checkbox"/> owner of the affected property as at the date of this application

Part 2 – Date of vacation of the affected property	
Date on which the affected property became vacant <i>Note: This application cannot be lodged if there are any persons currently residing in the property</i>	/ /

Part 3 – Previous assistance	
I/we have received financial assistance from the ACT Government (Taskforce) in relation to the affected property	<input type="checkbox"/> Yes (please specific below) <input type="checkbox"/> No
If you selected yes above please outline below:	
Amount of assistance provided if known:	\$
Assistance paid to who:	

Part 4 – Acknowledgement	
I/we acknowledge and agree:	
<ul style="list-style-type: none"> (i) all occupants of the affected property have vacated and no person is residing in the affected property (ii) to maintain the external area of the affected property (eg. mowing lawns, clearing gutters and securing the home) (iii) this application will be assessed in accordance with <i>The Loose Fill Asbestos Insulation Eradication Scheme – Lessor Assistance Grant Policy</i> (iv) that I will not reside in the affected property (v) that I will not knowingly permit another person(s) to reside in the affected property (vi) if my application is approved and previous assistance has been paid to me in respect of the affected property it will be deducted from the amount of the grant (vii) that the Taskforce may contact my managing agent for the affected property for the purpose of verifying any information set out in this application or otherwise provided by me in support of the application and I consent to that contact and the release of information by my managing agent (viii) the Taskforce may provide a copy of this application form (and any material provided by me in support of the application) to my managing agent for the purpose of verifying the information provided (ix) all information provided in this form is true and correct (x) I will sign and provide to the Taskforce a statutory declaration setting out matters required by the Taskforce to enable assessment of my application. 	

Part 5 – Banking details	
If my application is approved any grant is to be paid into my account as follows:	
Account name:	BSB:
Bank:	Account number:

Part 6 – Further information

Is there any other relevant information that you would like to provide in relation to your application? If so please provide below (attach additional page if necessary)

Part 7 – Provision of documents (The application cannot be processed without this documentation).

A copy of the residential tenancy agreement as at 18 February 2014 is attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Evidence of the lodgement of the bond for the tenancy is attached	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Statutory Declaration in approved form	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Part 8 – Managing Agent details

The managing agent details are a set out in the residential tenancy agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No*
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*If no please provide details of managing agent	Name: Address: Phone: Email:
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Part 9 - Signing

I/we declare that the information contained in this application is true and correct.

I/we have read the *The Loose Fill Asbestos Insulation Eradication Scheme –Lessor Assistance Grant Policy* and understand the application will be assessed in accordance with it.

Note: The application must be signed by all registered owners of the affected property.

Name: _____ Name: _____

Signature: _____ Signature: _____

Date: _____ Date: _____

Note: The *Criminal Code 2002* provides for significant penalties, including fines and imprisonment, for making a false or misleading statement to the Territory in the hope of obtaining a financial benefit.

Part 10 - Taskforce use only

Client case number:	#
Is applicant eligible for Lessor Assistance Grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes complete following questions)
Lessor Assistance Grant fund total applicant is eligible for:	Total: \$
Date grant processed:	/ /
Processed by:	Taskforce Officer name: