Emergency Assistance Application Form - Bushfire Support (Flinders Island)

Form Preview

Tasmanian Emergency Assistance Grants - Flinders Island

* indicates a required field

Eligibility
This grant is available to Tasmanian residents who require financial assistance to obtain essential shelter, clothing, food, transport and/or personal items following the emergency event.

Individuals and families must have been residing within one of the following eligible areas at the time of the emergency event:

Arthurs Creek, Carnacs Flat, Emita, Killiecrankie, Leeka, Lughrata, Mount Blyth, Mount Boyes, Mount Killiecrankie, Mount Tanner, Palana, Wingaroo, Withers Hill and Wybalenna.

The individual or family must have been:

- directed or advised by a relevant authority (such as the Tasmania Fire Service, SES or Tasmania Police) to evacuate their residence; or
- displaced from their residence due to the emergency event; or
- unable to return to their residence due to the emergency event; or
- isolated and unable to access essential services due to the emergency event.

Family members living at the same residential address should submit a single application. Applicants living in shared accommodation or group homes can apply separately.

Identification
Evidence of identity, residential address and household composition should be provided where requested in this application.

Residential Eligibility
Eligibility is based on your place of residence at the time of the bushfire.

If you were living in a house, unit, shack or rental property within an eligible area and meet the eligibility criteria above, you may be eligible for assistance.

Owning a property within an eligible area that was not your place of residence at the time of the emergency event does not make you eligible for assistance.

Eligibility Check - Emergency Assistance Grant

Are you eligible for an Emergency Assistance Grant? *

○ Yes, I declare that I am eligible for an Emergency Assistance Grant

Emergency event location

Please select the locality of your principal place of residence at the time of the emergency event.

Locality of your residence *
- ○ Arthurs Creek
- ○ Carnacs Flat
- ○ Emita
- ○ Killiecrankie
- ○ Leeka
- ○ Lughrata
- ○ Mount Blyth
- ○ Mount Boyes
- ○ Mount Killiecrankie
- ○ Mount Tanner
- ○ Palana
- ○ Wingaroo
- ○ Withers Hill
- ○ Wybalenna
- ○ Other:

Please select the local government area of your place of residence

Are you completing this application at a recovery centre, evacuation centre, Service Tasmania service centre or other support centre? *
○ Yes ○ No

Authorised support centre

Please enter the address of the recovery, evacuation or call centre that this application form is being completed at.

Address of the support centre *
Address

Please enter the address of the centre where this application is being completed.

Applicant details

Please enter your details in the section below.

The Department of Premier and Cabinet (DPAC) pledge to respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012.*
Please note by submitting this request you:

- are agreeing to allow DPAC to share your information for the purposes of assessing and processing your request, and
- acknowledge that some information in relation to this request such as the your name, funding purpose, amount, location and any other details the department may consider appropriate may be made public as part of a fair and transparent process when disbursing public funds.

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Name *

Title First Name Last Name

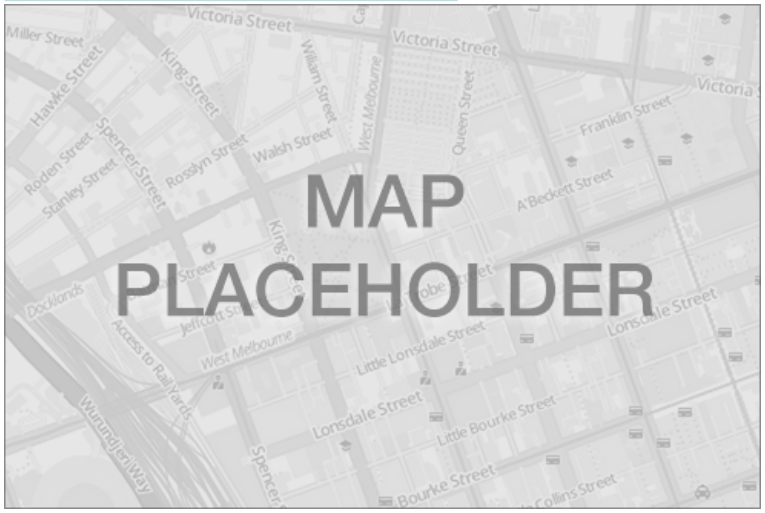
Please enter your name as it appears on your identification.

Date of birth *

Please enter your date of birth (dd/mm/yyyy)

Residential address at the time of the emergency event *

Address



Please provide your full residential street address, including suburb or locality and postcode.

Primary phone number *

Please provide a telephone number on which we can contact you. Include the area code if providing a landline number.

Email address *

Please enter a valid email address so we can send you confirmation of your application and updates on its progress.

Identification

You must provide evidence of your identity and residential address at the time of the emergency event.

Please select the type of identification you are providing below.

Note: A Tasmanian driver's licence or Personal Information Card showing your residential address is the quickest and simplest way to verify both your identity and residential address.

Photo Identification *
☐ Tasmanian driver's licence
☐ Tasmanian Government Personal Information Card
☐ None of the above
At least 1 choice must be selected.
Providing photo identification will assist us process your application quicker

Photo Identification Evidence

Note: Any photograph of an identity document submitted with your application must include your face, with the identity document held beside your face. Both your face and the details on the document must be clearly visible. Go HERE for an example of what is required.

Photographs that do not meet this requirement may delay the assessment of your application.

Photo identification attachments *
Attach a file:

Please attach a photo of both sides of your identification.

Address Confirmation

Does the address on your photographic identification match your residential address at the time of the emergency event? *
○ Yes
○ No
If the address on your photo identification does not match your current address, supplied in this application form, you will be asked to provide additional address evidence.

Personal Identification

Any photograph of an identity document submitted with your application must include your face, with the identity document held beside your face. Both your face and the details on the document must be clearly visible. Go HERE for an example of what is required.

Photographs that do not meet this requirement may delay the assessment of your application.

Additional Personal Identification *
☐ Passport
☐ Birth Certificate
☐ Other photographic identification
☐ Other:

At least 1 choice must be selected.

Please provide copies of personal identification documentation *
Attach a file:

Additional identification comments - Optional

Please provide any additional comments in regards to your identification and evidence details

Address Evidence

Any photograph of an address document submitted with your application must include your face, with the identity document held beside your face. Both your face and the details on the document must be clearly visible. Go HERE for an example of what is required.

Photographs that do not meet this requirement may delay the assessment of your application.

Additional Address Evidence - not more than 6 months old. *
☐ Utility bill (power, water, gas)
☐ Council rates or notice
☐ Banks statement or letter
☐ Centrelink Correspondence
☐ Other:

At least 1 choice must be selected.
MUST show your name, address and not be dated longer than 6 months ago.

Please provide your address evidence documentation *
Attach a file:

A minimum of 1 file must be attached.

Residential Address commenrts - Optional

Please use this section to advise of any relevant information in relation to your current residential address.

Emergency Assistance Grant amount

The available grant amount to you and your family at the same residential address is:

- $250 per adult (18 years and over);
- $125 per child (under 18 years); and
- up to $1,000 for any one family.

Examples:

- *A household with one adult and two dependent children is eligible to apply for a grant of $500 ($250 + $125 + $125 = $500).*

- *A household with two adults and four dependent children is eligible to apply for a grant of $1,000 ($250 +$250 + $125 + $125 + $125 +$125 = $1,000).*

Important: The total grant amount is calculated based on the information you provide, whilst your total amount below may show more than $1,000, the maximum amount a household can receive is capped at $1,000.

Number of adults you are applying for (18 and over) *

Number of adults (18 and over) living in the residence. Please enter 0 if none.

Number of children you are applying for (Under 18) *

Number of children (Under 18) living in the residence. Please enter 0 if none.

Total adults and children applying for emergency assistance.

This number/amount is calculated.

Total Grant Amount Requested *

$

This amount is automatically calculated and has a maximum value of $1,000.

Maximum Grant $1,000

Please note that the maximum amount you can received per family is capped at $1,000.

Evidence of household composition

A Medicare card listing the applicant and other family members will be accepted as evidence of household composition. No additional evidence is required for family members listed on the Medicare card provided.

For adult family members (aged 18 years and over) not listed on the Medicare card, please provide evidence that they reside at the same residential address as you.

Separate documentation is not required for children under 18 years of age.

All family members claiming assistance as part of the same household should be included in this application and should not submit separate applications.

Please upload your Medicare card and/or evidence of a shared residential address for adult family members not listed on your Medicare card. *
Attach a file:

Family member details

Please enter the full name and age of each additional family member included in this application. Do not include yourself again.

You can add more family members by clicking the 'Add More' button.

Full name	Age
Please enter Full name	Please enter Age in Years. Enter "1" if child is less than 12 months.

Bank account details

Subject to your application being approved, payment of the grant will be made by direct deposit into the applicant's nominated bank account. If your bank uses OSKO you will receive your payment even sooner. To check if your bank uses OSKO check at Search for your Bank to Get Started - Osko by BPAY

Please note, incorrect bank details will delay the payment of the grant.

Bank account *
Account Name

BSB Number Account Number

BSB will be validated and must be 6 numbers only

Declaration statement

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if my request is approved for funding, this request and any subsequent documentation in relation to this funding will form the terms and conditions of the funding provided. I also agree to cooperate with the department to provide any additional information on request that relates to this emergency support.

I authorise officers of the Tasmanian State Service to make any enquiries thought necessary to verify the information I have provided.

I understand that if this claim is fraudulent, it will be reported to the relevant authorities.

By selecting Yes and submitting this request, I agree to the above declaration statement. *

○ Yes

Additional Comments - Optional

Please provide any additional comments you may have in relation to this application

Additional supporting evidence - Optional
Attach a file:

You can attach any additional information here to support your application.