

centrelink

MODiA

Purpose of this form

This form is part of your claim for an Australian payment.

The information in this form is used to calculate your rate of payment of Australian Pension or review your entitlement under Australian social security law.

Filling in this form

- **Please use black or blue pen.**
- Print in BLOCK LETTERS.
- Mark boxes like this with a ✓ or X.
- Where you see a box like this ► **Go to 5** skip to the question number shown. You do not need to answer the questions in between.

Important Note: You must return this form with your claim form and **all** other supporting documents and lodge them at the same time. If you do not return all documents, your claim may not be accepted. The only exceptions will be if you are waiting for medical evidence or statements and other forms from a third party.

Returning your form

Check that all required questions are answered and that **all** forms are signed and dated.

Important Note: You must return **all** forms and **all** supporting documents and lodge them together. If you do not return all documents, your claim may not be accepted. The only exceptions will be if you are waiting for medical evidence or statements and other forms from a third party.

You can return forms and any supporting documents:

In person/by post – to your local US Social Security Administration (SSA) Field Office.

The SSA Field Office will copy original documents for you and return them to you. The claim forms do not need to be copied. If you do copy the claim forms, please ensure you keep a copy, not the original. The SSA Field Office will forward all forms and supporting documentation to the SSA Office of International Operations (OIO) in Baltimore MD. OIO will forward all the information to the Department of Human Services International Services in Australia.

Online – submit your documents online (excluding identity documents). For more information about how to access an Online Account or how to lodge documents online, go to **humanservices.gov.au/submitdocumentsonline**

By post – return your documents by sending them to:

**Department of Human Services
International Services
PO Box 7809
Canberra BC ACT 2610
Australia**

If you send original documents to us, we will make copies and return the original documents to you.

While you can lodge your form direct with us, lodging with your local SSA Field Office will normally make it easier and faster for you to receive a decision on your claim.

For more information

Call the Department of Human Services, International Services direct (free of charge) on **1866 3433 086**. You can call the Department of Human Services between 8.00 am and 5.00 pm (Hobart Time), Monday to Friday. This service may not be available from all locations in the USA. If this service is not available call the Department of Human Services on **+61 3 6222 3455**.

Note: Call charges apply – calls from mobile phones may be charged at a higher rate.

Information online – If you would like further information on Centrelink services and payments, you can go to **humanservices.gov.au**

Personal details

1 Your name

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

2 Your date of birth

Day	Month	Year
/	/	

3 Your Centrelink Reference Number (if known)

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
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4 Your contact phone number

It is important that you include the complete number (including country and area codes) as we may need to contact you on these numbers.

Country () Area code ()

5 Do you have a partner (married, registered partner, or de facto of the opposite-sex or same-sex)?

No **Go to 12**

Yes **Go to next question**

6 Please read this before answering the following questions.

If you are CURRENTLY in a relationship, we require your partner's details to assess your entitlement.

7 Is your partner also claiming an Australian pension?

No **Go to 9**

Yes **Go to next question**

8 Is your partner using this form or a separate form for a claim or to provide their details?

This form

Separate form

9 Your partner's name

Mr Mrs Miss Ms Other

Family name

First given name

Second given name

10 Your partner's date of birth

Day	Month	Year
/	/	

11 Do you give your partner permission to make enquiries on your behalf with the Department of Human Services?

You can change this authority at any time.

No

Yes



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Earnings

12 Do you (and/or your partner) CURRENTLY receive any income from work other than self-employment?

No **Go to 14**

Yes Give details below

AND

 Please attach a copy of your most recent payslip(s).

1 Name of employer

Address

Country

Job description

Workplace (if different from your employer's address)

Who works for this employer? You Your partner

Type of work

Full-time

Part-time How many hours do you work?

 per week

Amount earned **before** tax and other deductions

 per week

Amount earned annually **including all bonuses and additional payments, before tax and other deductions**

Currency

Do you plan to stop working soon?

No

Yes Date you plan to stop working

Day / Month / Year

12 Continued

2 Name of employer

Address

Country

Job description

Workplace (if different from your employer's address)

Who works for this employer? You Your partner

Type of work

Full-time

Part-time How many hours do you work?

 per week

Amount earned **before** tax and other deductions

 per week

Amount earned annually **including all bonuses and additional payments, before tax and other deductions**

Currency

Do you plan to stop working soon?

No

Yes Date you plan to stop working

Day / Month / Year

If you (and/or your partner) work for more than 2 employers, attach a separate sheet with details.

13 Do you (and/or your partner) receive a fringe benefit provided by this employer?

Fringe benefit means a benefit you receive as part of your earned income but not as a wage or salary (e.g. use of a car as part of a salary package).

No **Go to next question**


Yes  Please attach documents which indicate the type of fringe benefit and its value.

14 In the last 12 months, have you (and/or your partner) stopped working for any employers (including self-employment)?

No Go to 20

Yes Give details below

AND

 Please attach details which confirm you have stopped working for an employer (e.g. letter from employer).

1 Name of employer

Address

Country

Who stopped this work? You Your partner

Date last worked

Date last paid

Day / Month / Year

Day / Month / Year

2 Name of employer

Address

Country

Who stopped this work? You Your partner

Date last worked

Date last paid


Day / Month / Year

Day / Month / Year

If you (and/or your partner) stopped work with more than 2 employers, attach a separate sheet with details.

15 Have you (and/or your partner) received any redundancy payments since 20 September 2006?

No Go to next question

Yes  Please attach details which confirm the redundancy payment (e.g. letter from employer).

16 Have you (and/or your partner) received any leave entitlement payments?

No Go to next question

Yes  Please attach details which confirm the leave entitlement payments (e.g. letter from employer).

Household contents

17 Please read this before answering the following question.

Market value is what you would get if you sold your household contents and personal effects. It is not the replacement or insured value.

Household contents include:

- all normal furniture such as soft furnishings (e.g. curtains)
- electrical appliances (other than fixtures such as stoves and built-in items)
- antiques and works of art.

Personal effects include:

- jewellery for personal use
- hobby collections (e.g. stamps, coins).

What is your estimate of the net market value of your (and your partner's) normal household contents and personal effects?

Amount

Currency

Life insurance policies


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

Do NOT include details of life office or friendly society insurance bonds in this question. You will be asked about this in a later question.

No Go to next question

Yes Give details below

AND

 Please attach the policy document and the latest statement for each policy listed below.

1 Name of insurance company

Policy number

Surrender value

Currency

Owned by:

You Your partner

2 Name of insurance company

Policy number

Surrender value

Currency

Owned by:

You Your partner

3 Name of insurance company

Policy number

Surrender value

Currency

Owned by:

You Your partner

4 Name of insurance company

Policy number

Surrender value

Currency

Owned by:

You Your partner

If you (and/or your partner) require more space, attach a separate sheet with details.

- 19** Do you (and/or your partner) receive payments from an income protection policy?

No Go to next question

Yes  Attach the policy document and the latest statement for this policy.

- 20** Do you (and/or your partner) have any funeral bonds/ funeral investments, including a pre-paid funeral?

No Go to next question

Yes Give details below

1 Name of company

Name of product

APIR code

Purchase price incl. instalments but not interest

\$

Current value as per latest statement

\$

Your share

%

Partner's share

%

2 Name of company

Name of product

APIR code

Purchase price incl. instalments but not interest

\$

Current value as per latest statement

\$

Your share

%


Partner's share

%

If you (and/or your partner) require more space, attach a separate sheet with details.

- 21** Have you (and/or your partner) a contract to have funeral services provided for which an agreed sum has already been paid to the provider or used to buy funeral bonds assigned to the provider?

No Go to next question

Yes  Attach a copy of each contract.

Vehicles

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

Do NOT include a vehicle, boat, caravan or trailer in which you live.

No Go to next question

Yes Give details below

1 Make (e.g. Toyota)	Model (e.g. Corolla)
<input type="text"/>	<input type="text"/>
Year	Market value
<input type="text"/>	<input type="text"/>
Amount owing	Currency
<input type="text"/>	<input type="text"/>
Your share <input type="text"/> %	Partner's share <input type="text"/> %

2 Make (e.g. Toyota)	Model (e.g. Corolla)
<input type="text"/>	<input type="text"/>
Year	Market value
<input type="text"/>	<input type="text"/>
Amount owing	Currency
<input type="text"/>	<input type="text"/>
Your share <input type="text"/> %	Partner's share <input type="text"/> %

3 Make (e.g. Toyota)	Model (e.g. Corolla)
<input type="text"/>	<input type="text"/>
Year	Market value
<input type="text"/>	<input type="text"/>
Amount owing	Currency
<input type="text"/>	<input type="text"/>
Your share <input type="text"/> %	Partner's share <input type="text"/> %

If you (and/or your partner) require more space, attach a separate sheet with details.

Bank accounts

23 Give details of all your (and/or your partner's) bank accounts, including term deposits, joint accounts and accounts you hold under any other name, inside and outside Australia.

 Please attach the latest statement for each account.

1	Name of institution	<input type="text"/>
	Type of account (e.g. savings)	<input type="text"/>
	Account number	<input type="text"/>
	Account balance	<input type="text"/>
	Currency	<input type="text"/>
	Name of account holder(s)	
	<input type="text"/>	
	<hr/>	

2	Name of institution	<input type="text"/>
	Type of account (e.g. savings)	<input type="text"/>
	Account number	<input type="text"/>
	Account balance	<input type="text"/>
	Currency	<input type="text"/>
	Name of account holder(s)	
	<input type="text"/>	
	<hr/>	

3	Name of institution	<input type="text"/>
	Type of account (e.g. savings)	<input type="text"/>
	Account number	<input type="text"/>
	Account balance	<input type="text"/>
	Currency	<input type="text"/>
	Name of account holder(s)	
	<input type="text"/>	
	<hr/>	

If you (and/or your partner) require more space, attach a separate sheet with details.

Bonds and debentures

24 Do you (and/or your partner) have any bonds or debentures?

Include investments inside and outside Australia.
Do NOT include friendly society bonds or life insurance bonds. You will be asked about these in a later question.

No Go to next question

Yes Give details below

AND

 Please attach the latest statement for each investment listed below.

1 Type of investment

Name of company

Current amount invested

Currency

Your share %

Partner's share %

2 Type of investment

Name of company

Current amount invested

Currency

Your share %

Partner's share %

3 Type of investment

Name of company

Current amount invested

Currency

Your share %

Partner's share %

If you (and/or your partner) require more space, attach a separate sheet with details.

Money on loan


25 Do you (and/or your partner) have money on loan to another person or organisation?

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

No Go to next question

Yes Give details below

AND

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

1 Who did you lend the money to?

Date lent

Amount lent

Day / Month / Year

Current balance of loan

Currency

Lent by you %

Lent by your partner %

2 Who did you lend the money to?

Date lent

Amount lent

Day / Month / Year

Current balance of loan

Currency

Lent by you %

Lent by your partner %

3 Who did you lend the money to?

Date lent

Amount lent

Day / Month / Year

Current balance of loan

Currency

Lent by you %

Lent by your partner %

If you (and/or your partner) have more than 3 loans, attach a separate sheet with details.

26 Do you (and/or your partner) own any shares, options, rights, convertible notes, warrants or other securities **LISTED** on an Australian Stock Exchange (e.g. ASX, NSX, APX or Chi-X)* or a stock exchange outside Australia?

Include shares traded in exempt stock markets.


Do NOT include:

- managed investments
- investments purchased with a margin loan.

No Go to next question

Yes Give details below

AND

 Please attach the latest statement(s) detailing your share holding for each share listed below.

1 Name of company

Type of share/investment (e.g. ordinary share, option)

ASX* code (if known)

Current market value (if share is NOT listed on the ASX*)

Country (if share is NOT listed on the ASX*)

Number of shares or other securities

Your share %

Partner's share %

2 Name of company

Type of share/investment (e.g. ordinary share, option)

ASX* code (if known)

Current market value (if share is NOT listed on the ASX*)

Country (if share is NOT listed on the ASX*)

Number of shares or other securities

Your share %

Partner's share %

If you (and/or your partner) require more space, attach a separate sheet with details.

27 Do you (and/or your partner) own any shares, options or rights issued in a PUBLIC company NOT listed on any stock exchange, inside or outside Australia?

Include shares traded in exempt stock markets.


Do NOT include:

- managed investments
- investments purchased with a margin loan.

No Go to next question

Yes Give details below

AND

 Please attach the latest statement(s) detailing your share holding for each share listed below.

1 Name of company

Type of shares

Number of shares

Current market value

Currency

Your share %

Partner's share %

2 Name of company

Type of shares

Number of shares

Current market value

Currency

Your share %

Partner's share %

3 Name of company

Type of shares

Number of shares

Current market value

Currency

Your share %

Partner's share %

If you (and/or your partner) require more space, attach a separate sheet with details.

Managed investments and superannuation

28 Do you (and/or your partner) have any managed investments, inside or outside Australia?

Include investment trusts, personal investment plans, life office and friendly society bonds.

Do NOT include:

- life insurance policies or superannuation and rollover investments
- investments purchased with a margin loan.

* APIR is a commonly used code for fund managers in Australia to identify individual financial products.

No Go to next question

Yes Give details below

AND

 Please attach documents which show details for each investment listed below.

1 Name of company

Name of product (e.g. investment trust)

Type of product/option (e.g. balanced, growth)

APIR* code (if known)

Number (if applicable)

Current market value of investment

Currency

Your share %

Partner's share %

28 *Continued*

2 Name of company

Name of product (e.g. investment trust)

Type of product/option (e.g. balanced, growth)

APIR* code (if known)

Number (if applicable)

Current market value of investment

Currency

Your share %

Partner's share %


If you (and/or your partner) require more space, attach a separate sheet with details.

29 Do you (and/or your partner) own any managed investments or securities purchased with a margin loan?

No Go to next question

Yes Give details below

AND

 Please attach the latest statement detailing your margin loan(s) for each investment.

1 Name of margin loan company

Current portfolio

APIR code (if known)

Current margin loan balance

Your share

Partner's share

 %

 %

2 Name of margin loan company

Current portfolio

APIR code (if known)

Current margin loan balance

Your share

Partner's share

 %

 %

If you (and/or your partner) require more space, attach a separate sheet with details.

30 In the last 12 months have you (and/or your partner) borrowed an amount which is secured against your home?

Include:

- Home Equity Conversion Loan
- Reverse Equity Mortgage.


Do NOT include:

- a mortgage taken out to purchase your home.

No Go to next question

Yes Give details below

AND

 Attach a copy of the loan agreement or contract.

Name of the organisation agreement entered into with

Address of the organisation

Country

Entered into by: You Your partner

If you (and/or your partner) require more space, attach a separate sheet with details.

31 Please read this before answering the following question.

YOU should answer this question **ONLY** if you (and/or your partner) are age pension age or claiming Age Pension.

See the table below for age pension qualifying age.

Date of birth	Qualifying age
On or before 30 June 1952	You meet the age requirements now
1 July 1952 to 31 December 1953	65 years and 6 months
1 January 1954 to 30 June 1955	66 years
1 July 1955 to 31 December 1956	66 years and 6 months
From 1 January 1957	67 years

Do you (or your partner) have any money invested in Australian superannuation where the fund is still in accumulation phase and not paying a pension?

Include:

- superannuation funds such as retail, industry, corporate or employer and public sector
- retirement savings accounts
- any money held in a Self Managed Superannuation Funds (SMSF) and Small APRA Funds (SAF) if the funds are complying.

No Go to next question

Yes Give details below

AND

 Attach the latest statement for each superannuation investment. If you have a SMSF or SAF, attach the financial returns and member statement for the fund.

1 Name of institution/fund manager

Name of fund

Product reference number

Date of joining/investment

Day	Month	Year
/	/	/

Current market value

\$

Owned by:

You Your partner

31 *Continued*

2 Name of institution/fund manager

Name of fund

Product reference number Date of joining/investment
 Day / Month / Year

Current market value Owned by:
 \$ You Your partner

If you (and/or your partner) require more space, attach a separate sheet with details.

Income stream products

32 **Please read this before answering the following question.**

An **income stream** is a regular series of payments which may be made for a lifetime or fixed period by a financial institution or employer subject to Australian prudential regulations.

Where the income stream is from a country other than Australia it will be assessed differently than if it were from a source inside Australia.

An income stream may be payable by:

- a financial institution
- a retirement savings account
- a superannuation fund
- a Self Managed Superannuation Fund (SMSF)
- a Small APRA Fund (SAF).

Types of income streams include:

- account-based pension (also known as allocated pension)
- market-linked pension (also known as term allocated pension)
- annuities
- defined benefit pension (e.g. ComSuper pension, State Super pension)
- superannuation pension (non-defined benefit).

32 *Continued*

Do you (and/or your partner) receive income from any income stream products?

No **Go to next question**

Yes **Give details below**

AND



You (and/or your partner) will need to attach a **Details of Income Stream Product** form (SA330) or a similar schedule, for each Australian income stream product. The form or similar schedule must be completed by your product provider or the trustee of the Self Managed Superannuation Fund (SMSF) or Small APRA Fund (SAF) or the SMSF administrator.

If you do not have this form, go to **humanservices.gov.au/forms** or call us.

1 Name of product provider/SMSF/SAF

Type of income stream

Product reference number Commencement date
 Day / Month / Year

Owned by: You Your partner

2 Name of product provider/SMSF/SAF

Type of income stream

Product reference number Commencement date
 Day / Month / Year

Owned by: You Your partner

If you (and/or your partner) have more than 2 income stream products, attach a separate sheet with details.

Other investments

33 Do you (and/or your partner) have any money invested in, or do you receive income from, any other investments not declared elsewhere on this form?

Include all investments inside and outside Australia not declared elsewhere on this form.

Do NOT include real estate inside or outside Australia, private trusts, private companies or business. You will be asked about these in later questions.

No Go to next question

Yes Give details below

AND

 Please attach documents which show details for each investment listed below.

1 Type of investment

Name of organisation/company

Current value of investment	Income received in last 12 months
<input type="text"/>	\$ <input type="text"/>

Currency	Your share	Partner's share
<input type="text"/>	<input type="text"/> %	<input type="text"/> %

2 Type of investment

Name of organisation/company

Current value of investment	Income received in last 12 months
<input type="text"/>	\$ <input type="text"/>

Currency	Your share	Partner's share
<input type="text"/>	<input type="text"/> %	<input type="text"/> %

If you (and/or your partner) require more space, attach a separate sheet with details.

Gifting

34 In the last five years have you (and/or your partner) given away, sold for less than their value, or surrendered a right to, any cash, assets, property or income?

Include forgiven loans and shares in private companies.

No Go to next question

Yes Give details below

1 What you gave away or sold for less than its value (e.g. money, care, second home, land, farm)

Date given or sold	What it was worth
Day / Month / Year <input type="text"/>	<input type="text"/>

Amount you received for the item	Currency
<input type="text"/>	<input type="text"/>

Your share <input type="text"/> %	Partner's share <input type="text"/> %
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Was this gift to a Special Disability Trust (SDT)? No Yes

2 What you gave away or sold for less than its value (e.g. money, care, second home, land, farm)

Date given or sold	What it was worth
Day / Month / Year <input type="text"/>	<input type="text"/>

Amount you received for the item	Currency
<input type="text"/>	<input type="text"/>

Your share <input type="text"/> %	Partner's share <input type="text"/> %
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Was this gift to a Special Disability Trust (SDT)? No Yes

If you (and/or your partner) require more space, attach a separate sheet with details.

Other pension-type payments from outside Australia

35 Do you (and/or your partner) receive income from outside Australia?

Includes:

- payments for retirement or old age
- payments for disability or invalidity
- payments for widowhood or survivorship
- payments for children
- superannuation payments
- payments for war injury
- payments for war service
- payments as a war widow
- war restitution payments
- compensation payments
- other pensions, benefits or allowances from outside Australia.

No Go to next question

Yes Give details below

AND



Please attach the most recent document showing payment details for each of the pensions, benefits or allowances paid (e.g. pension certificate).

1 Type of payment

<input type="text"/>	
Paid in name of	
<input type="text"/>	
Authority paying it	
<input type="text"/>	
Country paying it	Reference number
<input type="text"/>	<input type="text"/>
Amount of payment before deductions	Currency of payment
<input type="text"/>	<input type="text"/>
How often paid?	Received by:
<input type="text"/>	You <input type="checkbox"/> Your partner <input type="checkbox"/>

35 Continued

2 Type of payment

<input type="text"/>	
Paid in name of	
<input type="text"/>	
Authority paying it	
<input type="text"/>	
Country paying it	Reference number
<input type="text"/>	<input type="text"/>
Amount of payment before deductions	Currency of payment
<input type="text"/>	<input type="text"/>
How often paid?	Received by:
<input type="text"/>	You <input type="checkbox"/> Your partner <input type="checkbox"/>

3 Type of payment

<input type="text"/>	
Paid in name of	
<input type="text"/>	
Authority paying it	
<input type="text"/>	
Country paying it	Reference number
<input type="text"/>	<input type="text"/>
Amount of payment before deductions	Currency of payment
<input type="text"/>	<input type="text"/>
How often paid?	Received by:
<input type="text"/>	You <input type="checkbox"/> Your partner <input type="checkbox"/>

If you (and/or your partner) have more than 3 types of payments, attach a separate sheet with details.

36 Will you (and/or your partner) be claiming any pension, benefit, allowance, superannuation, compensation or similar payment in the next 12 months?

No Go to next question

Yes Give details below

1 Type of payment	
<input type="text"/>	
Country claiming from	
<input type="text"/>	
When are you going to claim?	Who is claiming this payment?
Day / Month / Year	You <input type="checkbox"/> Your partner <input type="checkbox"/>

2 Type of payment	
<input type="text"/>	
Country claiming from	
<input type="text"/>	
When are you going to claim?	Who is claiming this payment?
Day / Month / Year	You <input type="checkbox"/> Your partner <input type="checkbox"/>

If you (and/or your partner) have more than 2 types of payments, attach a separate sheet with details.

Money from boarders and lodgers

37 Do you (and/or your partner) receive money from any boarders or lodgers living with you?

Include boarders or lodgers who live with you or in accommodation at the property you live in (e.g. granny flat).

Do NOT include family members (e.g. son, daughter, parent).

No Go to next question

Yes Give details in the next column

37 *Continued*

1 Name of boarder or lodger	
<input type="text"/>	
Relationship to you (e.g. friend, cousin)	Number of meals you provide each day
<input type="text"/>	<input type="text"/> each day
Amount paid for board or lodging	Currency
<input type="text"/>	<input type="text"/>
How often paid	Date boarder or lodger started paying
<input type="text"/>	Day / Month / Year

2 Name of boarder or lodger	
<input type="text"/>	
Relationship to you (e.g. friend, cousin)	Number of meals you provide each day
<input type="text"/>	<input type="text"/> each day
Amount paid for board or lodging	Currency
<input type="text"/>	<input type="text"/>
How often paid	Date boarder or lodger started paying
<input type="text"/>	Day / Month / Year

3 Name of boarder or lodger	
<input type="text"/>	
Relationship to you (e.g. friend, cousin)	Number of meals you provide each day
<input type="text"/>	<input type="text"/> each day
Amount paid for board or lodging	Currency
<input type="text"/>	<input type="text"/>
How often paid	Date boarder or lodger started paying
<input type="text"/>	Day / Month / Year

If you (and/or your partner) have more than 3 boarders or lodgers, attach a separate sheet with details.


38 Do you (and/or your partner) receive payments from Australian Government sources other than Centrelink income support payments?

For example, an Australian family assistance payment.

No **Go to next question**

Yes **Give details below**

AND

 Attach a letter or other document(s) that shows the reference number and details for each payment (other than payments made by us).

1 Type of payment

Who pays it?

Reference number (if known) Date commenced (if known)

<input type="text"/>	Day / Month / Year
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Paid to: You Your partner

2 Type of payment

Who pays it?

Reference number (if known) Date commenced (if known)

<input type="text"/>	Day / Month / Year
----------------------	--------------------

Paid to: You Your partner

If you (and/or your partner) receive more than 2 payments, attach a separate sheet with details.

Lump sum payment

39 In the last 12 months, have you (and/or your partner) received a lump sum payment that is not declared elsewhere on this form?

Do NOT include compensation, insurance or damages lump sum payments. You will be asked about these in a later question.

No **Go to next question**

Yes **Give details below**

1 Type of lump sum

Amount paid

Currency

Date paid

Day /	Month /	Year
-------	---------	------

Payment received by:

You Your partner

2 Type of lump sum

Amount paid

Currency

Date paid

Day /	Month /	Year
-------	---------	------

Payment received by:

You Your partner

3 Type of lump sum

Amount paid

Currency

Date paid

Day /	Month /	Year
-------	---------	------

Payment received by:

You Your partner

If you (and/or your partner) have more than 3 lump sum payments, attach a separate sheet with details.

Other payments

- 40** Do you (and/or your partner) receive any income from other sources, not previously mentioned on this form?

Include income from:

- gratuities
- other government departments (e.g. study allowance, War Widow's/Service Pension)
- match or sporting payments
- other payments made from inside or outside Australia
- any other income you have not included elsewhere on this form.


Note: Income includes any payment in kind, such as non-monetary payments for services.

Do NOT include compensation or damages payments. You will be asked about these in a later question.

No Go to next question

Yes Give details below

AND

 Please attach documents which show details of the payment (e.g. statement from other Government departments).

1 Type of payment

Who pays it

Amount received before tax and other deductions

Currency

How often paid

If part of amount is for children – how much

Paid to: You Your partner

2 Type of payment

Who pays it

Amount received before tax and other deductions

Currency

How often paid

If part of amount is for children – how much

Paid to: You Your partner

If you (and/or your partner) have more than 2 other payments, attach a separate sheet with details.

Cash holdings

- 41** Do you (and/or your partner) have any cash holdings?

Include notes and coins you have in a safety deposit box, or you are holding instead of putting it into a bank account, or someone else is looking after for you.

Do NOT include cash you have for shopping and other day to day expenses.

No Go to next question

Yes Give details below


Total amount	Currency
<input type="text"/>	<input type="text"/>
Your share <input type="text"/> %	Partner's share <input type="text"/> %

Compensation

- 42** Are you (and/or your partner) receiving or entitled to claim an insurance payout, damages, or compensation (if made wholly or partly in respect of lost earnings or lost capacity to earn resulting from personal injury)?

No Go to next question

Yes


 You will need to complete and attach a **Compensation and damages** form (**Mod C**). If you do not have this form, go to humanservices.gov.au or call the Department of Human Services.

Property

- 43** Do you (and/or your partner) own or partly own any property inside or outside Australia, other than the home in which you live?

No Go to next question

Yes

 You will need to complete and attach a **Real estate details** form (**Mod R**). A separate form must be used for each property. If you do not have this form, go to humanservices.gov.au or call the Department of Human Services.

44 Are, or have you (and/or your partner), been involved in a private trust?

You may be, or have been:


- a trustee
- an appointor
- a beneficiary

or have:

- made a loan to a private trust
- made a gift of cash, assets, or private property to a private trust in the last 5 years
- relinquished control of a private trust since 1 January 2002
- a private annuity
- a life interest
- an interest in a deceased estate.

No Go to next question

Yes

 You will need to complete and attach a **Private Trust** form (Mod PT). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.

45 Are, or have you (and/or your partner), been involved in a private company?

You may be, or have been:

- a director
- a shareholder

or have:

- made a loan to a private company
- transferred shares in a private company since 1 January 2002
- made a gift of cash, assets or property to a private company in the last 5 years.

No Go to next question

Yes

 You will need to complete and attach a **Private Company** form (Mod PC). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.


46 Are you (and/or your partner) involved in any type of business?

Include:

- farming
- self-employed
- sole-trader
- partnership
- sub-contractor.

No Go to next question

Yes

 You will need to complete and attach a **Business details** form (Mod F). If the business owns real estate you will also need to complete and attach a **Real estate details** form (Mod R) for each property. If you do not have these forms, go to **humanservices.gov.au** or call the Department of Human Services.

Other assets

47 Do you (and/or your partner) own or partly own any other assets not previously mentioned on this form?

Include assets inside or outside Australia.

No Go to next question

Yes Give details below

1 Description of asset

Current market value

Currency

Asset owned by You Your partner

2 Description of asset

Current market value

Currency

Asset owned by You Your partner

3 Description of asset

Current market value

Currency

Asset owned by You Your partner

If you (and/or your partner) have more than 3 other assets, attach a separate sheet with details.

Accommodation

48 Which of the following best describes where you live?

In a home you (and/or your partner) own **Go to 49**
This includes paying it off (mortgage).

In a place where you pay private **Go to 63**
rent or board and lodging

In a retirement village **Go to 53**

In accommodation which you have the **Go to 55**
right to use free for life
Such as a granny flat to use for life.

In a residential aged care home (nursing **Go to 56**
home or hostel) which provides nursing
care

Other (give details below)

Go to 63

Your principal home


49 Is your principal home, or the land on which your principal home stands, used for commercial (business) purposes?

No **Go to 51**

Yes **Go to next question**

50 Have you previously told Centrelink about your principal home, or the land on which it stands, which is used for commercial (business) purposes?

No


 Attach a copy of the latest balance sheet, profit and loss statements, tax returns and your (and/or your partner's) latest personal tax return.
▶ **Go to next question**

Yes **Go to next question**

51 Is the land on which your principal home stands more than two hectares (five acres) in area?

No **Go to next question**

Yes

 You will need to complete and attach a **Real estate details** form (**Mod R**). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.

52 Is the land on which your principal home stands on more than one title?

No **Go to 63**

Yes

 You will need to complete and attach a **Real estate details** form (**Mod R**). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.
▶ **Go to 63**

Retirement village

53 Did you pay an entry contribution for your accommodation in the retirement village?

No Go to next question


Yes How much?

Currency

54 Do you still own your former home?

No Go to 63

Yes

 You will need to complete and attach a **Real estate details** form (Mod R). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.
▶ Go to 63

Life interest

55 Did you pay a sum of money and/or transfer any assets to another person in return for this accommodation for life?

No Go to 63

Yes Give details below

Name of person or organisation

Address

Country

Date paid/transferred

Day	Month	Year
/	/	/

Amount paid

Currency

AND/OR

What asset was transferred

Market value of assets transferred

Currency

▶ Go to 63

Residential aged care home (nursing home or hostel) which provides nursing care

56 On what date did you move into your accommodation in the nursing home or hostel?

Day	Month	Year
/	/	/

57 Do you still own your former home?

No Go to 63

Yes Go to next question

58 Do you have a partner?

No Go to 62

Yes Go to next question

59 Does your partner still live in your former home?

No Go to next question

Yes Go to 63


60 What date did your partner leave your former home?

Day	Month	Year
/	/	/

61 Did your partner leave your former home more than two years ago?

No Go to 63

Yes

 You will need to complete and attach a **Real estate details** form (Mod R). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.
▶ Go to 63

62 Did you leave your former home more than two years ago?

No Go to next question

Yes

 You will need to complete and attach a **Real estate details** form (Mod R). If you do not have this form, go to **humanservices.gov.au** or call the Department of Human Services.

63 Use this checklist to remind you which documents you must attach.

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

Where you are asked to supply original documents, only supply copies of original documents.

	You	Your partner
Most recent payslip(s) <i>(If you answered Yes at question 12)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of fringe benefits <i>(If you answered Yes at question 13)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of stopped working for an employer <i>(If you answered Yes at question 14)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of redundancy payments <i>(If you answered Yes at question 15)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of leave entitlement payments <i>(If you answered Yes at question 16)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest insurance policy documents and latest statements <i>(If you answered Yes at question 18)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Income protection policy documents and latest statements <i>(If you answered Yes at question 19)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Funeral Service contract <i>(If you answered Yes at question 21)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest bank account statements <i>(If required at question 23)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest statements for bonds and debentures <i>(If you answered Yes at question 24)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Loan contract and latest statements</i> <i>(If you answered Yes at question 25)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest statements for shares LISTED on a stock exchange <i>(If you answered Yes at question 26)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest statements for shares NOT listed on a stock exchange <i>(If you answered Yes at question 27)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of managed investments <i>(If you answered Yes at question 28)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest statement for margin loans for each investment <i>(If you answered Yes at question 29)</i>	<input type="checkbox"/>	<input type="checkbox"/>

63 *Continued*

	You	Your partner
Copy of the loan agreement or contract <i>(If you answered Yes at question 30)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest statements for approved deposit funds, deferred annuities, rollover funds and superannuation funds, tax returns and member's statements for SMSF and SAF funds <i>(If you answered Yes at question 31)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Latest schedules for income stream products or Details of income stream product form (SA330) <i>(If you answered Yes at question 32)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of other investments <i>(If you answered Yes at question 33)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of payments from outside Australia <i>(If required at question 35)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Letters/documents with details of other Australian government payments <i>(If you answered Yes at question 38)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Documents which show details of other payments <i>(If you answered Yes at question 40)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A Compensation and damages form (Mod C) <i>(If you answered Yes at question 42)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A Real estate details form (Mod R) <i>(If you answered Yes at questions 43, 46, 51, 52, 54, 61 and 62)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A Private Trust form (Mod PT) <i>(If you answered Yes at question 44)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A Private Company form (Mod PC) <i>(If you answered Yes at question 45)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A Business details form (Mod F) <i>(If you answered Yes at question 46)</i>	<input type="checkbox"/>	<input type="checkbox"/>
A copy of the latest balance sheet, profit and loss statements, tax returns and your (and/or your partner's) latest personal tax return <i>(If you answered No at question 50)</i>	<input type="checkbox"/>	<input type="checkbox"/>

64 IMPORTANT INFORMATION

Privacy and your personal information

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim.

Your information may be used by the department, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which the department will manage your personal information, including our privacy policy, at humanservices.gov.au/privacy

Statement

65 Statement

I declare that:

- the information I have provided on this form is correct.

I understand that:

- giving false or misleading information is a serious offence.
- the Australian Government Department of Human Services can make relevant enquiries necessary to make sure I receive the correct entitlement.
- I must return all supporting documents at the same time as I lodge my claim form. If I do not return all documents, my claim may not be accepted. The only exceptions will be if I am waiting for medical evidence or statements and other forms from a third party.

Your signature



Date

Day	Month	Year
/	/	/

Your partner's signature



Date

Day	Month	Year
/	/	/