

centrelink

When to use this form



Use this form to tell us about your living arrangements so we can assess your correct entitlement to payment at either the single or partnered rate. This may be for future entitlements, payments received in the past or assessing entitlements for past periods, for example, family assistance.

We may need you to fill in this form even if you do not share your accommodation with someone. This is so we can pay you the right amount for your situation.

We generally require a completed form from both yourself and the third party identified in this form for an assessment to be completed.

If you have a partner, you will need to complete a **Partner details (MOD P)** form.

If the person you live with is your ex-partner, you will need to complete a **Relationship details – Separated under one roof (SS293)** form.

If you do not have the required form, go to servicessaustralia.gov.au/forms

Once you have returned the form we may need to talk to you about it.

Keeping your information safe

You should consider the steps you need to take to keep your personal information safe if your relationship or living arrangements have changed.

Changing your passwords or PIN will make sure only you have access to your myGov and online accounts.

For more information, go to servicessaustralia.gov.au/keepinformationsafe

How do we assess your relationship?

We will assess your relationship based on the following 5 factors:

- financial arrangements
- nature of the household
- social aspects of the relationship
- sexual relationship
- nature of commitment.

For more information on how we assess your relationship, go to servicessaustralia.gov.au/moc

Relationships and safety concerns

If you need to tell us about a change in your living arrangements or relationship and you are concerned about your safety, there may be support we can provide. We can support you if you are in, have left, or are preparing to leave a family and domestic violence situation.

If any of the questions in this form cause you distress or you are affected by family and domestic violence, you may wish to speak to a social worker. You can call us on **132 850** or visit one of our service centres and ask to speak to a social worker.

For more information, go to servicessaustralia.gov.au/domesticviolence

If you cannot answer the questions

It is important that you answer all the questions and give as much detail as you can. If you are not able to give any of the information asked for, say so on the form.

Having a partner

You have a partner if we consider you a member of a couple. We consider you a member of a couple if you are either:

- married
- in a registered relationship
- in a de facto relationship.

A registered relationship is where your relationship is registered under a law of a state or territory. A de facto relationship is where you and your partner are in a relationship similar to a married couple but are not married or in a registered relationship.

We may still consider you a member of a couple if you are not physically living with your partner. For example, your partner may fly-in fly-out or live away for work, like military or oil rig workers.

For more information, go to servicesaustralia.gov.au/moc

How to choose a suitable referee

Your referee must:

- be 18 or older
- not be your parent, step parent, sibling or child
- not be your correspondence nominee
- not be your most recent ex-partner.

Your referee should also be a person who is familiar with your circumstances.

It is preferable that a referee be a person of some standing in the community, for example, a minister of religion, doctor, police officer, counsellor, social or welfare worker, solicitor, or community leader.

Services Australia may contact your referee to discuss your current relationship status.

For more information

If you need to contact us, go to servicesaustralia.gov.au/contact

Section 1 – your details and relationship with another person

Filling in this form

You can fill and sign this form digitally in some browsers, or you can open it in Adobe Acrobat Reader. If you do not have Adobe Acrobat Reader, you can print this form and sign it.

If you have a printed form:

- Use black or blue pen.
- Print in BLOCK LETTERS.
- Where you see a box like this **Go to 1** skip to the question number shown.

Your details

1 Your Customer Reference Number (if known)

Your name

Family name

First given name

Second given name

Your date of birth (DD MM YYYY)

2 Has your phone number changed since you last told us?

No **Go to next question**

Yes Your contact phone number (including area code)

3 Your permanent address

 Postcode

Your relationship with another person

4 Read this before answering the following questions.

We may decide you are a member of a couple based on an assessment of your relationship or living arrangements. This could be someone you live with or someone who lives separately to you.

Where the words 'other person' appear in this form, they refer to the person you name below.

Other person's Customer Reference Number (if known)

Other person's family name

Other person's first given name

Other person's second given name

Other person's date of birth (DD MM YYYY)

5 Other person's contact phone number (including area code)

6 Are you experiencing family and domestic violence?

Any information you give us is private. We will only use it to help you find the right services and support. This is for people whose safety and wellbeing may be at risk due to a partner, ex-partner or family member.

No **Go to 9**

Yes **Go to next question**

Do not **Go to 9**
wish to say

7 Is the family and domestic violence in relation to the other person (named at **Question 4**)?

No

Yes



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8 Would you like to be contacted to discuss your support options specific to your needs?


We can provide support to people affected by family and domestic violence.

No

Yes

9 Are you partnered to someone else, whether living in the same household or not?

No Go to next question

Yes  You will need to complete and return a **Partner details (MOD P)** form. If you do not have this form, go to servicesaustralia.gov.au/forms
▶ **Go to 39**

10 Is the other person the partner of anyone else, whether living in the same household or not?

No Go to next question

Yes **Go to 39**

I do not know Go to next question

11 **Read** this before answering the following questions.

We may still consider you a member of a couple if you are not physically living with your partner.
For example, your partner may fly-in fly-out or live away for work, like military or oil rig workers.


How do you describe your relationship with the other person?


Tick **one** of the boxes below to describe your relationship status right now.

Friend/Housemate Go to next question

Boyfriend/Girlfriend Go to next question

Non-binary relationship Go to next question

Separated  You will need to complete and return a **Relationship details – Separated under one roof (SS293)** form. If you do not have this form, go to servicesaustralia.gov.au/forms
▶ **Go to 39**

Partner (Married, registered or de facto)  You will need to complete and return a **Partner details (MOD P)** form. If you do not have this form, go to servicesaustralia.gov.au/forms
▶ **Go to 39**

Other Give details below

How do you describe your relationship with the other person?

Form with three horizontal lines for text entry.

12 Does the property where you live have a separate self-contained area, for example, a granny flat, caravan or converted garage?

A self-contained area is a place which includes separate or private sleeping, cooking and bathroom facilities.

No Go to next question

Yes Who lives in the self-contained area?

Tick one only

I do **Go to 39**

Other person **Go to 39**

Me and the other person Go to next question

No-one Go to next question

Third party Give details below

Form with three horizontal lines for text entry.

Section 2 – living arrangements

Financial arrangements

13 Do you or the other person own the home you currently live in (including paying it off)?

No **Go to 15**

Yes Give details below

Tick one only

We own the home together *Go to next question*

I own the home on my own **Go to 16**

I, or we, own the home with another person **Go to 16**

The other person owns the home **Go to 15**

14 Is your home still being paid off?

No **Go to 16**

Yes Give details below

What are the total mortgage repayments?

\$ per month

How much of this do **you** pay?

\$ per month

 Provide your latest loan account statement.
▶ **Go to 16**

15 Do you pay rent or board and/or lodgings at the place where you currently live?

No Give details below about why you **do not** pay for your accommodation.

.....

.....

.....

.....

Yes Give details below

Tick one only

Accommodation expenses are split *Go to next question*
equally amongst all residents

Accommodation expenses are not Give details below
split equally amongst all residents.

.....

.....

.....

If you need more space, provide a separate sheet with details.

16 Do you share any other real estate assets jointly with the other person, such as investment properties, business properties, caravan sites or moorings?

No *Go to next question*

Yes Give details below

Tick all that apply

Investment properties

Business properties

Caravan sites

Moorings

Other Give details below

.....

.....

Do you plan to sell or change these joint assets?

No Give details below about why you **do not** plan to sell or change these joint assets

.....

.....

.....

Yes Give details below about when you plan to sell or change these joint assets

.....

.....


.....

If you need more space, provide a separate sheet with details.

17 Do you and the other person have any joint accounts (including bank, credit and store cards)?

No Go to next question

Yes Give details below

 Provide a copy of the latest statement(s) of your current joint account(s).

Name of financial institution the account is held with

Type of account

What is the purpose of the joint account?

Tick all that apply

Shared rent and/or utilities only

Joint savings account

Joint mortgage

Joint credit card(s)

Other Give details below

Do you plan to separate this account?

No Give details below about why you **do not** plan to separate this account

Yes Give details below about when you plan to separate this account

If you need more space, provide a separate sheet with details.

18 Do you and the other person have access to any of each other's account(s) (including bank, credit and store cards)?

No Go to next question

Yes Give details below

Tick all that apply

I have access to the other person's account(s)

The other person has access to my account(s)

Why do you and/or the other person have access?

If you need more space, provide a separate sheet with details.

19 Do you and the other person have any outstanding joint debts on credit cards, hire purchase, store accounts or personal loans?

No Go to next question

Yes Give details below

Describe the debt type

Date when debt occurred (DD MM YYYY)

Arrangement(s) for repaying this debt

What are the arrangements for separating the debt?

If you need more space, provide a separate sheet with details.

20 Have you and the other person purchased any of the following items together?

No Go to next question

Yes Give details below

Tick all that apply	Date purchased (DD MM YYYY)		
Car <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Caravan <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Furniture <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Household appliances <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Electrical items <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (Give details) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Why did you purchase this/these items jointly?

What are the arrangements for the jointly owned items should either of you move out?

If you need more space, provide a separate sheet with details.

21 Give information about the payment of the following household expenses.

Phone/Internet

Do you share the payment of either a landline, internet or mobile phone with the other person?

No Who pays for it?

Yes What is the arrangement for sharing the payment?

Electricity

Do you share the payment with the other person?

No Who pays for it?

Yes What is the arrangement for sharing the payment?

Gas

Do you share the payment with the other person?

No gas connected

No Who pays for it?

Yes What is the arrangement for sharing the payment?

Food

Do you share the food or shopping expenses with the other person?

No Who pays for it?

Yes What are the arrangements for sharing this expense?

22 Do you and the other person jointly own any of the following insurance policies?

No Go to next question

Yes Give details below

Tick all that apply

Private medical

House and/or contents insurance

Vehicle insurance

Other policies Give details below

Do you plan to cancel or change this/these joint insurance policies?

No Give details below about why you **do not** plan to cancel or change the joint insurance policies

Yes Give details below about the planned cancellation or change

23 Is the other person nominated as a beneficiary under your will, superannuation or life insurance?

Do not have these policies Go to next question

No Go to next question

Yes Give details below

Tick all that apply

Will

Superannuation

Life insurance

Other

Do you plan to cancel or change your beneficiary?

No Give details below about why you **do not** plan to cancel or change your beneficiary

Yes Give details below about your plan to cancel or change your beneficiary

Nature of the household

24 Do you and the other person share a bedroom?

No Go to next question

Yes Give details below about why you share a bedroom.

25 Who does the following household tasks?

Cleaning

Tick one only

I do

Other person

We both do

Third party Give details below

Continued

Washing

Tick one only

I do

Other person

We both do

Third party Give details below

Empty box with a dashed line for writing details.

Gardening

Tick one only

Does not apply

I do

Other person

We both do

Third party Give details below

Empty box with a dashed line for writing details.

General maintenance

Tick one only

I do

Other person

We both do

Third party Give details below

Empty box with a dashed line for writing details.

26 Are there any dependent children younger than 16 regularly living or staying at your address?

No Go to next question

Yes Give details below

Do you and the other person **both** look after the child(ren)?

No Go to next question

Yes What are the current care arrangements for the child(ren)?

Large empty box with a dashed line for writing details.

If you need more space, provide a separate sheet with details.

Social aspects

27 Do relatives, friends or regular associates (including social media contacts) consider you and the other person to be partnered?

For example, are you and the other person invited out as a couple.

No Go to next question

Yes Give details below

Large empty box with a dashed line for writing details.

If you need more space, provide a separate sheet with details.

28 Have you ever claimed that you and the other person were partnered to any businesses or government agencies?

For example, financial institution, Medicare, Australian Taxation Office.

No Go to next question

Yes Give details below explaining why, including the dates

Large empty box with a dashed line for writing details.

If you need more space, provide a separate sheet with details.

29 Do you share social and leisure activities with the other person?

For example, sporting events, family occasions, movies, holidays or other activities.

No Go to next question

Yes What sort of activity and how often?

Sporting events

Weekly

Monthly

Other

Why do you participate jointly in this activity?

Family occasions

Weekly

Monthly

Other

Why do you participate jointly in this activity?

Movies

Weekly

Monthly

Other

Why do you participate jointly in this activity?

Holidays

Once a year

Other

Why do you participate jointly in this activity?

Other activities Give details below, including how often

Sexual relationship

30 Read this before answering the following questions.

We need to ask the following question as one of the considerations against the 5 factors for assessing your relationship status.

See **Notes** page 1 for more information on how we assess your relationship.

Do you currently have a sexual relationship with the other person?

No

Yes

Nature of commitment

31 How long do you intend to share accommodation with the other person and why?

Tick one only

Less than 3 months

3–6 months

6–12 months

More than 12 months

Why do you continue to share accommodation?

32 If the other person is employed, are you listed as the emergency contact at their work?

Not applicable

No

Yes Why are you listed as the emergency contact?

Someone who knows about your relationship status

- 37** We need the name and contact details of a suitable referee who knows about your current relationship status.

Your referee must:

- be 18 or older
- not be your parent, step parent, sibling or child
- not be your correspondence nominee
- not be your most recent ex-partner.

See **Notes** page 2 for information on how to choose a referee.

If you cannot give details below, tell us why.

Full name

Address

Postcode

Phone number (including area code)

Relationship to you

If you cannot give referee details, tell us why.

Section 3 – privacy notice and declaration

Checklist

- 38** Which of the following documents are you providing with this form?

Your latest loan account statement (if you answered Yes at question 14)	<input type="checkbox"/>
Copy of latest statement(s) of your current joint account(s) (if you answered Yes at question 17)	<input type="checkbox"/>

Privacy notice

- 39** You need to read this

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Declaration

- 40** I declare that:

- the information I have provided in this form is complete and correct.

I understand that:

- if submitting this document as part of a claim, the claim may not be accepted unless supporting documents are lodged at the same time as the claim. The only exception will be if I am waiting for medical evidence or other documents from a third party.
- if I am receiving a payment or benefit from Centrelink, I must notify Centrelink of any change(s) to this information **within 14 days** of the change(s) occurring.
- Centrelink can make relevant enquiries to make sure that correct entitlements are received.
- giving false or misleading information is a serious offence.

Your signature

Date (DD MM YYYY)

Next Steps

- 1 Check that you have answered all the questions that you need to.
- 2 Provide all requested information and any additional required forms.
- 3 Check you have signed and dated this form.

Returning this form

Return this form and any supporting documents:

- **online** using your Centrelink online account. For more information, go to servicesaustralia.gov.au/centrelinkuploadocs
- by post to
Services Australia
PO Box 7802
CANBERRA BC ACT 2610
- in person at one of our service centres.