

Use this form to claim a Commonwealth Seniors Health Card for yourself and your partner.

Online account



Completing your claim online is faster and easier.

Access your Centrelink online account through myGov and select:

- Payments and claims
- then Claims
- then Make a claim.

If you do not have a myGov account, you can create one at my.gov.au and then link Centrelink to it.

When to use this form



The Commonwealth Seniors Health Card gives older Australians access to cheaper prescription medicines, Australian government funded medical services and other government concessions.

To qualify for a Commonwealth Seniors Health Card you (and your partner if they are also claiming) must:

- have reached age pension age
- meet an income test, and
- meet residence rules.

For more information, read the **Information you need to know about your claim for a Commonwealth Seniors Health Card (Ci010) (Information Booklet)**.

Go to servicessaustralia.gov.au/forms

If you receive:

- a Centrelink pension or benefit, or
- assistance from the Department of Veterans' Affairs such as:
 - Service Pension
 - Age Pension
 - Income Support Supplement
 - Veteran Payment
 - Commonwealth Seniors Health Card

do **not** lodge your claim until **after** the cancellation date.

If your partner is receiving an entitlement from the Department of Veterans' Affairs, you may still be entitled to a card from Services Australia. Contact the Department of Veterans' Affairs for information about entitlements you may get from them.

This card does not cover dependants and/or partners, only the cardholder. If you have dependants or a partner who is not eligible for this card, read the 'Low Income Health Care Card' section in the **Information Booklet**.

What else you will need to provide

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

For more information

Go to servicesaustralia.gov.au/seniorhealthcard

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



Information in your language

We can translate documents you need for your claim or payments for free.

To speak to us in your language, call **131 202**.

Call charges may apply.



Hearing and speech assistance

If you have a hearing or speech impairment, you can use:

- the National Relay Service **1800 555 660**, or
- our TTY service on **1800 810 586**. You need a TTY phone to use this service.

For more information about help with communication, go to servicesaustralia.gov.au and search 'other support and advice'.

Partner permitted to enquire

Allowing your partner to enquire on your behalf may save you time when dealing with us. It will let you and your partner use more self-service functions online and over the phone.

If you give your partner **permission to enquire**, it will allow your partner to ask questions about your Centrelink payments and services. They could ask us:

- your current rate of payment
- the reason your payment has stopped
- the reason your payment has gone up or down, for example, income and assets, debt and back payment information.

They **can** tell us how much employment income you were paid, changes in your circumstances and view your details online.

They **cannot**:

- act on your behalf with Centrelink
- apply for payments for you
- fill in and sign forms and statements on your behalf
- come to appointments for you.

You have a right to have your personal information kept private. For more information, go to servicesaustralia.gov.au/privacypolicy

Changing your partner's permission to enquire is your choice and you can change this permission at any time.

If you think your partner is misusing the arrangement, call **132 850** or visit one of our service centres.

If you are affected by family and domestic violence, there is help available. Call **132 850** Monday to Friday, 8am to 5pm local time, and ask to speak to a social worker. Otherwise, you can contact 1800RESPECT (**1800 737 732**), a 24 hour service. If you are in immediate danger, call **000**. For more information, go to servicesaustralia.gov.au/domesticviolence

Claim for a Commonwealth Seniors Health Card (SA296)

Filling in this form

You can fill 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 complete 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 5** skip to the question number shown.

Read this before completing this claim form.

Under social security law, claims for the Commonwealth Seniors Health Card cannot be lodged before a person has reached age pension age. You can lodge this form either **on, or after**, the date you reach age pension age. Read the **Information Booklet** for more details on the qualifying age for the Commonwealth Seniors Health Card.

1 Do you need an interpreter when dealing with us?

This includes an interpreter for people who have a hearing or speech impairment.

No **Go to 4**

Yes **Go to next question**

2 What is your preferred spoken language?

3 What is your preferred written language?

4 Your Centrelink Customer Reference Number (if known)

5 Do you receive a Centrelink pension or benefit?

No **Go to next question**

Yes  You cannot get a Commonwealth Seniors Health Card unless your pension or benefit is cancelled.
Complete this form but **do not** lodge it until after the cancellation date.

6 Do you receive or have one of the following from the Department of Veterans' Affairs:

- Service Pension
- Age Pension
- Income Support Supplement
- Veteran Payment
- Commonwealth Seniors Health Card?

No **Go to next question**

Yes  You cannot get a Commonwealth Seniors Health Card unless your pension or benefit is cancelled.
Complete this form but **do not** lodge it until after the cancellation date.

7 Do you have a partner?

No **Go to 11**

Yes Your partner's Centrelink Customer Reference Number (if known)

8 Is your partner also claiming the Commonwealth Seniors Health Card?

No You will still need to give your partner's personal and income details. You will not be required to provide identity documents for your partner.

Go to 11

Yes If you are both eligible, you will both get a Commonwealth Seniors Health Card.

9 Does your partner receive a Centrelink pension or benefit?

No **Go to next question**

Yes  Your partner cannot get a Commonwealth Seniors Health Card unless their pension or benefit is cancelled.
Complete this form but **do not** lodge it until after the cancellation date.



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10 Does your partner receive or have one of the following from the Department of Veterans' Affairs (DVA):

- Service Pension
- Age Pension
- Income Support Supplement
- Veteran Payment
- Commonwealth Seniors Health Card?

No ► *Go to next question*

Yes ►



Your partner cannot get a Commonwealth Seniors Health Card unless their pension or benefit is cancelled.

Complete this form but **do not** lodge it until after the cancellation date.

About you

11 Your name

Mr Mrs Miss Ms Mx Other

Family name

First given name

Second given name

12 Have you been known by any other name(s)?

Include:

- name at birth
- name before marriage
- previous married name
- Aboriginal or skin name
- alias
- adoptive name
- foster name.

No ► *Go to next question*

Yes ► Give details below

1 Other name

Type of name (for example, name at birth)

2 Other name

Type of name (for example, name before marriage)

If you have more than 2 other names, provide a separate sheet with details.

13 Your gender

Male

Female

Non-binary

14 Your date of birth (DD MM YYYY)



Provide an original document as proof of your date of birth.

25 What is your country of citizenship?

Australia Date citizenship granted (DD MM YYYY)

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▶ **Go to 31**

Other Give details below

Country of citizenship

Date citizenship granted (DD MM YYYY)

--	--	--	--	--	--	--	--

26 What type of visa did you arrive on?

Permanent *Go to next question*

Temporary *Go to next question*

New Zealand passport **Go to 28**
(Special Category visa)

Not sure **Go to 28**

27 Your visa details on arrival

Visa subclass Date visa granted (DD MM YYYY)

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28 Has your visa changed since you arrived in Australia?

No *Go to next question*

Yes Most recent visa details

Visa subclass Date visa granted (DD MM YYYY)

--	--	--	--	--	--	--	--

29 Did you start living in Australia before 1965?

No *Go to next question*

Yes Give details below

Name of the ship or airline on which you arrived

Name of the place where you first arrived/disembarked

What was your name when you first arrived in Australia?

30 Did either of your parents arrive on a refugee or humanitarian visa?

No

Yes

31 Read this before answering the following question.

We need to know if you have lived in any countries other than Australia. 'Lived' means where you made your home or spent a long period of time – it does not include places you visited for a holiday.

Have you **ever** lived outside Australia for any period?

No *Go to next question*

Yes List **all** countries you have lived in since birth and the date you started living in each country.

Include when you started living in **Australia**.

Do not include short trips or holidays.

1 Country

Date from (DD MM YYYY)

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2 Country

Date from (DD MM YYYY)

--	--	--	--	--	--	--	--

3 Country

Date from (DD MM YYYY)

--	--	--	--	--	--	--	--

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

32 Tick **one** of the boxes below to tell us about your relationship status right now.

For more information about relationship status, go to **servicesaustralia.gov.au/moc**

If you have ever been separated from your current partner, give the date that you most recently got back together (reconciled) with your partner.

This will update your Centrelink record only. If you need to call us to update your Medicare and/or Child Support record, go to **servicesaustralia.gov.au/phoneus**

Married

Date married or last reconciled with your partner (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 33**

Registered relationship

(your relationship is registered under Australian state or territory law)

Date registered or last reconciled with your partner (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 33**

De facto

(your relationship is similar to a married couple but you are not married or in a registered relationship)

Date you started your relationship or last reconciled with your partner (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 33**

Separated

(previously in a marriage, registered or de facto relationship)

Date of last separation (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 59**

Divorced

Date of divorce (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 59**

Widowed

(previously in a marriage, registered or de facto relationship)

Date of partner's death (DD MM YYYY)
[][] [][] [][][][]
▶ **Go to 59**

Never married or lived with a partner

Go to 59

33 Do you live in the same home as your partner?

No ▶ *Go to next question*

Yes ▶ **Go to 36**

34 Why are you not living with your partner?

Partner's illness

Your illness

Partner is in prison

Partner's employment

Other ▶ Give details below

35 Period not living with your partner (DD MM YYYY)

From [][] [][] [][][][]

To [][] [][] [][][][] ▶ **Go to 37**

or indefinite

36 Do you give permission for your partner to speak with us on your behalf?

For more information, read page 2.

No

Yes

About your partner

37 Your partner's name

Mr Mrs Miss Ms Mx Other

Family name

First given name

Second given name

38 Has your partner been known by any other name(s)?

Include:

- name at birth
- name before marriage
- previous married name
- Aboriginal or skin name
- alias
- adoptive name
- foster name.

No **Go to next question**

Yes **Give details below**

1 Other name

Type of name (for example, name at birth)

2 Other name

Type of name (for example, name before marriage)

If your partner has more than 2 other names, provide a separate sheet with details.

39 Your partner's gender

Male

Female

Non-binary

40 Your partner's date of birth (DD MM YYYY)

 Provide an original document as proof of your partner's date of birth.

41 Your partner's permanent address (if different to yours)

Postcode

42 Your partner's postal address (if different to yours)

Postcode

43 **Read** this before answering the following question.

If your partner provides a mobile phone number or an email address means you may receive SMS or emails from us. To read the terms and conditions, go to servicesaustralia.gov.au/em

Partner's contact details

Home phone number (including area code)

Mobile phone number

Work phone number (including area code)

Alternative phone number (including area code)

Email

44 **Read** this before answering the following question.

This question is voluntary and will not affect your partner's entitlement to a Commonwealth Seniors Health Card. If you do answer, the information will help us to continue to improve services to Aboriginal and Torres Strait Islander Australians.

Is your partner of Aboriginal or Torres Strait Islander Australian descent?

If they are of both Aboriginal and Torres Strait Islander Australian descent, tick both 'Yes' boxes.

No

Yes – Aboriginal Australian

Yes – Torres Strait Islander Australian

45 Read this before answering the following question.

This question is voluntary and will not affect your partner's entitlement to a Commonwealth Seniors Health Card. If you do answer, the information will help us to continue to improve services to people of Australian South Sea Islander descent.

Australian South Sea Islanders are the descendants of Pacific Islander labourers brought from the Western Pacific in the 19th Century.

Is your partner of Australian South Sea Islander descent?

No

Yes

46 Does your partner want to authorise a person or organisation to make enquiries, make updates, act and/or get payments on their behalf?

No Go to next question

Yes



You need to fill in and return an **Authorising a person or organisation to enquire or act on your behalf (SS313)** form. You can also do this online. You and the person or organisation will need a Centrelink online account.

If you want more information or to download the form, go to

servicesaustralia.gov.au/authorisedrepresentative

47 What country is your partner currently living in?

This is the country where your partner normally lives on a long term basis.

Australia Go to next question

Other Give country below

48 Has your partner **ever** travelled outside Australia, including short trips and holidays?

This question will help us to verify their Australian residence.

No Go to next question

Not applicable – never Go to next question travelled to Australia

Yes Give details below

Year last entered Australia

Passport number

Country of issue

49 Is your partner an Australian citizen **who was born in Australia**?

No Go to next question

Yes Go to 58

50 What is your partner's country of birth?

51 What is your partner's country of citizenship?

Australia Date citizenship granted (DD MM YYYY)

Go to 58

Other Give details below

Country of citizenship

Date citizenship granted (DD MM YYYY)

52 Has your partner **ever** lived in Australia?

No Go to 59

Yes Go to next question

53 What type of visa did your partner arrive on?

Permanent Go to next question

Temporary Go to next question

New Zealand passport (Special Category visa) Go to 55

Not sure Go to 55

54 Your partner's visa details on arrival

Visa subclass Date visa granted (DD MM YYYY)

55 Has your partner's visa changed since you arrived in Australia?

No Go to next question

Yes Most recent visa details

Visa subclass Date visa granted (DD MM YYYY)

56 Did your partner start living in Australia before 1965?

No Go to next question

Yes Give details below

Name of the ship or airline on which they arrived

Name of the place where they first arrived/disembarked

What was their name when they first arrived in Australia?

57 Did either of your partner's parents arrive on a refugee or humanitarian visa?

No

Yes

58 Read this before answering the following question.

We need to know if your partner has lived in any countries other than Australia. 'Lived' means where your partner made their home or spent a long period of time – it does not include places they visited for a holiday.

Has your partner **ever** lived outside Australia for any period?

No Go to next question

Yes List **all** countries your partner has lived in since birth and the date they started living in each country.

Include when they started living in **Australia**.

Do not include short trips or holidays.

1 Country

Date from (DD MM YYYY)

2 Country

Date from (DD MM YYYY)

3 Country

Date from (DD MM YYYY)

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

59 Read this before answering the following questions.

For more information about dependent children, read the **Information Booklet**.

Do you (and/or your partner) have any dependent children?

No **Go to 66**

Yes Give details below

If you have more than 2 dependent children, copy and provide this page for additional children before completing details for child 1.

▶ **Go to 60 for Child 1**

Child 1

60 Family name

First given name

Second given name

61 Do you receive Family Tax Benefit for **this** child?

No



Provide proof of birth (for example, **birth certificate**) for this child if you have not previously provided it to us.

▶ Go to next question

Yes **Go to 65 for Child 1**

62 Has this child ever been known by any other names?

No **Go to next question**

Yes List the other names

63 Gender

Male

Female

Non-binary

64 Date of birth (DD MM YYYY)

65 Do you have another dependent child?

No **Go to 66**

Yes **Go to 60 for Child 2**

Child 2

60 Family name

First given name

Second given name

61 Do you receive Family Tax Benefit for **this** child?

No



Provide proof of birth (for example, **birth certificate**) for this child if you have not previously provided it to us.

▶ Go to next question

Yes **Go to 65 for Child 2**

62 Has this child ever been known by any other names?

No **Go to next question**

Yes List the other names

63 Gender

Male

Female

Non-binary

64 Date of birth (DD MM YYYY)

65 Do you have another dependent child?

No **Go to next question**

Yes



Provide details of each additional child.

▶ Go to next question

66 Read this before answering the following questions.

You may not be paid if you do not give us your tax file number (TFN). If you have a partner, we will need their TFN too. If you or your partner do not have a TFN, or do not know what yours is, you can apply for one through the Australian Taxation Office.

In giving us your (and your partner's) TFN in relation to this claim you authorise us to use your (and your partner's) TFN for other social security payments and services in future where necessary.

Have you (and your partner) given us your tax file number(s) before?

No Go to next question

Not sure Go to next question

Yes **Go to 68**

67 Do you (and your partner) have a tax file number(s)?

You

No Go to **ato.gov.au**

Yes Your tax file number

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Your partner

No Go to **ato.gov.au**

Yes Your partner's tax file number

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68 The Low Income Health Care Card offers concessions for your dependents as well as yourself. You may be eligible for a Low Income Health Care Card if your income is below the applicable limit.

For more information, go to **servicesaustralia.gov.au/lic**

Do you want to apply for a Low Income Health Care Card?

No Go to next question

Yes  You will need to complete and return a **Claim for a Health Care Card (SS050)** form. If you do not have this form, go to **servicesaustralia.gov.au/lic**

69 Read this before answering the following questions.

The income details you provide can be for either of the 2 financial years before the current financial year. They should be the most recent verifiable details. You and your partner **must** provide income details for the **same financial year**.

Which financial year are you (and your partner) providing income details for?

--	--	--	--	--	--	--	--	--	--

70 Have **you** lodged an income tax return for the financial year?

No Give the reason why you have not lodged an income tax return

Income was below the tax free threshold or as a result of an Australian Taxation Office tax offset

Only income was a government pension or allowance

None of the above

Go to next question

Yes Go to next question

71 Has **your partner** lodged an income tax return for the financial year?

No Give the reason why your partner has not lodged an income tax return

Income was below the tax free threshold or as a result of an Australian Taxation Office tax offset

Only income was a government pension or allowance

None of the above

Go to next question

Yes Go to next question

72 Give the following income details for the financial year you have given in question 69.

	You	Your partner	 Documents
<p>A Taxable income</p> <p>or</p> <p>If you (and/or your partner) are not required to lodge an income tax return, give the amount of income you (and/or your partner) received. Only include income that is taxable. Do not include income asked for in parts B to E of this question.</p>	<p>\$ <input type="text"/></p> <p>or</p> <p>\$ <input type="text"/></p>	<p>\$ <input type="text"/></p> <p>or</p> <p>\$ <input type="text"/></p>	Provide an original Notice of Assessment issued by the Australian Taxation Office or documents to verify this amount.
<p>B Foreign income you (and/or your partner) did not pay Australian income tax on. Write the amount in Australian dollars.</p>	<p>+</p> <p>AUD <input type="text"/></p>	<p>+</p> <p>AUD <input type="text"/></p>	Provide your income tax return or if you (and/or your partner) are not required to lodge an income tax return, other documents to verify this amount.
<p>C Total net investment loss:</p> <ul style="list-style-type: none"> Net rental property losses (see the Income tests section of your income tax return) Net financial investment losses (see the Income tests section of your income tax return) <p>You must add these amounts even though they are a loss because such a loss will have reduced your taxable income.</p>	<p>+</p> <p>\$ <input type="text"/></p> <p>+</p> <p>\$ <input type="text"/></p>	<p>+</p> <p>\$ <input type="text"/></p> <p>+</p> <p>\$ <input type="text"/></p>	Provide your income tax return or if you (and/or your partner) are not required to lodge an income tax return, other documents to verify this amount.
<p>D Value of employer provided benefits above \$1,000.</p> <p>Write the total amount of your employer provided benefits less the first \$1,000.</p>	<p>+</p> <p>\$ <input type="text"/></p>	<p>+</p> <p>\$ <input type="text"/></p>	Provide your payment summary.
<p>E Total amount of:</p> <ul style="list-style-type: none"> reportable employer superannuation contributions (see the Income tests section of your income tax return) personal deductible superannuation contributions (see the Supplementary section of your income tax return) 	<p>+</p> <p>\$ <input type="text"/></p> <p>+</p> <p>\$ <input type="text"/></p>	<p>+</p> <p>\$ <input type="text"/></p> <p>+</p> <p>\$ <input type="text"/></p>	Provide your payment summary, income tax return or if you (and/or your partner) are not required to lodge an income tax return, other documents to verify this amount.
<p>F Total income (A + B + C + D + E = F)</p>	<p>=</p> <p>\$ <input type="text"/></p>	<p>=</p> <p>\$ <input type="text"/></p>	
<p>G Your (and your partner's) combined total adjusted taxable income.</p>	<p>\$ <input type="text"/></p>		

73 Read this before answering the following question.

If you (or your partner) own any account-based income streams, income may be deemed on the account balance of the pension and added to any other income amounts you have declared to determine whether you are entitled to a Commonwealth Seniors Health Card.

Do you (or your partner) receive income from an account-based income stream?

No Go to next question

Yes Give details below



For each account-based income stream, you (and/or your partner) will need to provide:

- a Centrelink/DVA schedule or similar schedule, or
- a **Details of income stream product (SA330)** form.

The schedule or form must be completed by your:

- product provider
- the trustee of the Self Managed Superannuation Funds (SMSF) or Small APRA Funds (SAF), or
- SMSF administrator.

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

1 Name of product provider/SMSF/SAF

Product reference number

Commencement date
(DD MM YYYY)

Owned by:

You Your partner

2 Name of product provider/SMSF/SAF

Product reference number

Commencement date
(DD MM YYYY)

Owned by:

You Your partner

3 Name of product provider/SMSF/SAF

Product reference number

Commencement date
(DD MM YYYY)

Owned by:

You Your partner

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

74 Is the:

- **combined total adjusted taxable income** listed at **72G**
- plus the deemed income from an account-based income stream, if you (or your partner) receive any

below or above the income limit for the Commonwealth Seniors Health Card?

Go to servicessaustralia.gov.au/deeming for the current deeming rates and servicessaustralia.gov.au/seniorshhealthcard for the current income limits.

Below the income limit **Do not complete 75 to 77. Go to 78**

Above the income limit You may still be eligible if your income will be below the income limits in the current financial year. *Go to next question*

75 Will your (and your partner's) combined income in the current financial year be the same, higher or lower than it was in the financial year you indicated at question **69**?

The same **Higher** You are not eligible for a Commonwealth Seniors Health Card because your income is too high. Do not continue with this claim.

Lower *Go to next question*

76 Why will your income be lower (for example, stopped working, previously sold significant asset(s) to pay for medical expenses, ceased operating a business)?

You will need to provide evidence to support the reason your (and your partner's) income will be lower.

77 Give an **estimate** of the income you (and your partner) expect to receive in the **current** financial year.

	You	Your partner
A Estimated taxable income or If you (and/or your partner) are not required to lodge an income tax return, give the amount of income you (and/or your partner) received. Only include income that is taxable. Do not include income asked for in parts B to E of this question.	\$ <input type="text"/> or \$ <input type="text"/>	\$ <input type="text"/> or \$ <input type="text"/>
B Foreign income you (and/or your partner) did not pay Australian income tax on. Write the amount in Australian dollars.	+ AUD <input type="text"/>	+ AUD <input type="text"/>
C Total net investment loss: <ul style="list-style-type: none"> Net rental property losses (see the Income tests section of your income tax return) Net financial investment losses (see the Income tests section of your income tax return) You must add these amounts even though they are a loss because such a loss will have reduced your taxable income.	+ \$ <input type="text"/> + \$ <input type="text"/>	+ \$ <input type="text"/> + \$ <input type="text"/>
D Value of employer provided benefits above \$1,000. Write the total amount of your employer provided benefits less the first \$1,000.	+ \$ <input type="text"/>	+ \$ <input type="text"/>
E Total amount of: <ul style="list-style-type: none"> reportable employer superannuation contributions (see the Income tests section of your income tax return) personal deductible superannuation contributions (see the Supplementary section of your income tax return) 	+ \$ <input type="text"/> + \$ <input type="text"/>	+ \$ <input type="text"/> + \$ <input type="text"/>
F Total income (A + B + C + D + E = F)	= \$ <input type="text"/>	= \$ <input type="text"/>
G Your (and your partner's) combined total adjusted taxable income. This total Adjusted Taxable Income plus any deemed income you (and your partner) may have from any account-based income streams will be used to work out your eligibility.	\$ <input type="text"/>	

Bank details

You

78 Read this before answering the following questions.

In certain circumstances, you may be entitled to a payment from us. Providing your bank details ensures you can receive any payment you become entitled to. You do not have to provide your bank details at this time, however providing them can prevent any future payment being delayed.

Do you wish to provide your bank details?

No **Go to 80**

Yes **Go to next question**

79 Where do you want your payment made?

The account must be in your name. A joint account is acceptable.

Payments cannot be made into an account used exclusively for funding from the National Disability Insurance Scheme.

Name of bank, building society or credit union

Branch number (BSB)

Account number (this may not be your card number)

Account held in the name(s) of

Your partner

78 Read this before answering the following questions.

In certain circumstances, you may be entitled to a payment from us. Providing your bank details ensures you can receive any payment you become entitled to. You do not have to provide your bank details at this time, however providing them can prevent any future payment being delayed.

Do you wish to provide your bank details?

No **Go to 80**

Yes **Go to next question**

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Name of bank, building society or credit union

Branch number (BSB)

Account number (this may not be your card number)

Account held in the name(s) of

Checklist

80 Which of the following forms and documents are you (and/or your partner) providing with this form?

Where you are asked to supply identity documents, provide original documents.

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

	Tick all that apply	
	You	Your partner
Confirmation of identity For more information, go to servicesaustralia.gov.au/identity	<input type="checkbox"/>	<input type="checkbox"/> Only if also claiming
Proof of your date of birth (see question 14 and 40)	<input type="checkbox"/>	<input type="checkbox"/>
Authorising a person or organisation to enquire or act on your behalf (SS313) form (If you answered Yes at question 20 or 46)	<input type="checkbox"/>	<input type="checkbox"/>
Dependent children proof of birth (if required at question 61)	<input type="checkbox"/>	
Details of each additional child (if required at question 65)	<input type="checkbox"/>	
Claim for a Health Care Card (SS050) form (If you answered Yes at question 68)	<input type="checkbox"/>	
Original Notice of Assessment or if you are not required to lodge an income tax return, other documents to verify this amount (see question 72A)	<input type="checkbox"/>	<input type="checkbox"/>
Income tax return or if you are not required to lodge a tax return, other documents to verify this amount (see question 72B)	<input type="checkbox"/>	<input type="checkbox"/>
Income tax return or if you are not required to lodge an income tax return, other documents to verify this amount (see question 72C)	<input type="checkbox"/>	<input type="checkbox"/>
Payment summary (see question 72D)	<input type="checkbox"/>	<input type="checkbox"/>
Payment summary and/or income tax return or if you are not required to lodge an income tax return, other documents to verify this amount (see question 72E)	<input type="checkbox"/>	<input type="checkbox"/>
Centrelink/DVA schedule or similar schedule or a Details of income stream product (SA330) form (If you answered Yes at question 73)	<input type="checkbox"/>	<input type="checkbox"/>
Documents to support the reason your income will be lower (see question 76)	<input type="checkbox"/>	<input type="checkbox"/>

81 YOUR PARTNER needs to complete this question

Do you give permission for your partner to speak with us on your behalf?

For more information, read page 2.

No

Yes

Privacy notice

82 You (and your partner) 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/privacypolicy

Declaration

83 I/We declare that:

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

I/We understand that:

- I/we must return **all** supporting documents at the same time as I/we lodge my/our claim form. If I/we do not return all documents, my/our claim may not be accepted. The only exception will be if I am/we are waiting for medical evidence or other documents from a third party.
- I/we may need to give further information if requested.
- Services Australia can make relevant enquiries to make sure I/we receive the correct entitlement.
- I/we must notify Services Australia of any changes to this information **within 14 days** of the change occurring.
- giving false or misleading information is a serious offence.

Your signature



Date (DD MM YYYY)

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Your partner's signature



Date (DD MM YYYY)

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Returning this form

You cannot lodge your claim form before reaching Age Pension age or while you are entitled to any of the assistance listed on page 1.

Return this form and any supporting documents:

- online** (excluding identity documents) using your Centrelink online account. For more information, go to servicesaustralia.gov.au/centrelinkuploaddocs
- by post to
Services Australia
Centrelink
PO Box 7800
CANBERRA BC ACT 2610
- in person at one of our service centres.