If you’re finding it tough to meet everyday expenses and you don’t already get payments from us, you may be able to get extra help. This form contains applications for three types of assistance. Your income and/or assets need to be under certain limits for each type of help you can get and there are some other conditions.

**Accommodation Supplement**
This can help with rent, board or the cost of owning a home.
If you and/or your partner are tenants living in a community housing property, you won’t be able to get it. Community housing properties are provided by Kāinga Ora (formerly Housing New Zealand) and approved community housing providers.

**Health and Disability Costs**
If you or a family member have a health condition or disability likely to continue for at least six months, you may be able to get extra help for your costs. We call this a Disability Allowance.
We may be able to help with costs such as visits to the doctor, medicines, household costs, some travel costs and many other things.
Your doctor or specialist will need to complete the Disability Certificate in the form.

**Temporary Additional Support**
This helps when you have essential living costs you have no other way to pay for. You also need to be doing what you can to reduce your costs or increase your income.

**What you need to do next**
You and your partner (if you have one) will need to:
1. Complete this application form.
2. If you’re applying for help with health and disability costs, a health practitioner needs to fill out the Disability Allowance medical certificate in the application.
3. Collect the documents you need to show us. There’s a checklist over the page to help you.
4. Bring this application form and the documents when you meet with us. If you don’t already have a meeting arranged, contact us on 0800 559 009 so we can set one up for you.

You must give us all the information we need.
If you don’t have all the information we need, talk with us and we may be able to help.
If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back. In some cases you could even be prosecuted.
Our commitment to YOU

Ka mōhio ki a koe
know you

We will get to know you, your situation and your needs

We will make sure you understand everything you need to know

We will use your feedback to improve our service

We will respect your privacy and be clear about how we use your information and who we share it with

Ka tautoko i a koe
support you

We will let you know everything you may be eligible for

We will help you however we can, as soon as we can

The information we give you will be accessible and consistent no matter how you contact us

We will be honest about our mistakes and put them right

Ka mahi tahi ki a koe
with you

We will respect you and what is important to you

We will work together to achieve shared goals

We will let you know your options, rights and obligations

Our actions will follow our words

How did we do?
Let us know by visiting msd.govt.nz/feedback or call us on 0800 559 009
Once you have filled out the application form, use this checklist to tick off all the documents you need for your meeting with us.

Talk to us if you do not have any of the documents, have given them to us recently or if there might be a delay in getting them.

### What you need to bring

#### Proof of who you are:

<table>
<thead>
<tr>
<th>What you need to bring</th>
<th>For you</th>
<th>For your partner (if you have one)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you were born in New Zealand</strong>, bring one type of official identification that has your full legal name and your date of birth (for example, your birth certificate, passport, driver licence, firearms licence, deed poll).</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td><strong>If you were born overseas</strong>, bring proof that you have a right to live in New Zealand (for example, a citizenship certificate, a New Zealand passport, a passport from another country with residence class visa or proof of permanent residence).</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td><strong>If your name has changed</strong>, bring your marriage certificate, deed poll, or other proof of the name change.</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td><strong>All people applying</strong> need to bring <strong>two</strong> more documents that help to prove who you are (for example, a marriage certificate, bank statement, phone or power account, driver licence).</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>A form or letter from Inland Revenue showing your tax number.</td>
<td>☐️</td>
<td>☐️</td>
</tr>
<tr>
<td>Proof of your bank account details, such as a bank statement or deposit slip.</td>
<td>☐️</td>
<td>☐️</td>
</tr>
</tbody>
</table>

**One of the documents above must be at least two years old.**

<table>
<thead>
<tr>
<th>What you need to bring</th>
<th>For you</th>
<th>For your partner (if you have one)</th>
</tr>
</thead>
</table>

**There are more things you need to bring in the table over the page.**
Depending on answers in the applicant form (pages 5 to 14) and partner form (pages 25 to 31), you may need to bring:

<table>
<thead>
<tr>
<th>For you</th>
<th>For your partner (if you have one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proof of your assets and their value.</td>
<td></td>
</tr>
<tr>
<td>Proof of payments, if you receive a benefit, allowance or pension from overseas.</td>
<td></td>
</tr>
<tr>
<td>Full birth certificates for each dependent child in your care.</td>
<td></td>
</tr>
<tr>
<td>Your marriage or civil union certificate, for a current relationship.</td>
<td></td>
</tr>
<tr>
<td>Your business accounts, if you have your own business.</td>
<td></td>
</tr>
<tr>
<td>Proof of any before-tax income for the 52 weeks before the application (for example, wages, holiday pay and any other income) and details of your income for the last 26 weeks.</td>
<td></td>
</tr>
<tr>
<td>Trust documents, if you’re involved in a trust (for example, trust deed, deed of debt, gift statements, accounts).</td>
<td></td>
</tr>
</tbody>
</table>

Depending on your answers on pages 15 to 24, you may need to bring:

**For you**

<table>
<thead>
<tr>
<th>If you’re applying for an <strong>Accommodation Supplement:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• proof of accommodation costs</td>
</tr>
<tr>
<td>• proof of your assets and their value.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you’re applying for help with <strong>Health and Disability Costs:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• proof of health-related costs</td>
</tr>
<tr>
<td>• a Disability Allowance medical certificate for each person you apply for.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If you’re applying for <strong>Temporary Additional Support:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• proof of any essential ongoing costs</td>
</tr>
<tr>
<td>• proof of accommodation costs</td>
</tr>
<tr>
<td>• proof of your rates rebate if you get one</td>
</tr>
<tr>
<td>• proof of your assets and their value.</td>
</tr>
</tbody>
</table>
In the applicant form, ‘you’, ‘your’, and ‘yourself’ means the person applying for Extra Help.
If we say ‘your partner’ this only applies to you if you have one.

Tell us about yourself

If you have received a benefit or extra financial help from us before, write your client number here if you know it. This number can be found on your Community Services Card or SuperGold Card if you have one.

Client number

What is your full name?

Mr  Mrs  Ms  Miss  Other

First and middle names

Surname or family name

Is the name on your birth certificate the same as above?

No  Yes

Tell us the name that is on your birth certificate

First and middle names

Surname or family name

Have you ever been known by any other name?

No  Yes

Write them all out below

1.

2.

What name would you like us to call you?

The name I wrote in Question 1

The name I wrote in Question 2

Write the full name
Tell us more about you

What date were you born?

Day  Month  Year

Are you:

☐ Male  ☐ Female  ☐ Gender diverse

ATTACHMENT FOR Q7: Bring a form or letter from Inland Revenue showing your tax number.

What is your Inland Revenue tax number?

ATTACHMENT FOR Q8: You need to provide proof of your bank account details.

What bank account would you want your payments to be paid into?

The account is in the name of:

The account number is:

Tell us how we can contact you

Where do you live?

Flat/House number  Street name

Suburb

Town/City

Is your mailing address different from where you live?

☐ No  ☐ Yes  Tell us your mailing address

How else can we contact you?

Tick the best way for us to first contact you

Home phone  (  )

Mobile phone  (  )

Other phone  (  )

Do you agree to get emails from us?

☐ No  ☐ Yes  Tell us your mailing address  ☐ I don't have an email address
Tell us your ethnicity

INFORMATION FOR Q13:
We collect this information for statistics we use in research and future development work.

Tick the group(s) you most identify with.
- Māori
- Which tribe(s) or iwi?
- New Zealand European
- Niuean
- Samoan
- Indian
- Other European
- Tolelauan
- Tongan
- Chinese
- Cook Island Māori
- Other
- Please write below
- Don’t want to answer

Tell us about your residence status

HOW TO ANSWER Q14:
This means you consider New Zealand your home, you’re a legal resident, you usually live here and you intend to stay.

Do you usually live in New Zealand?
- No
- Yes

What best describes your residence status in New Zealand? Tick only one box.
- New Zealand citizen by birth
- Go to question 18
- Granted New Zealand citizenship
- Date citizenship granted
- Day  Month  Year
- Go to question 16
- Granted permanent residency
- Date permanent residence granted
- Day  Month  Year
- Go to question 16
- Other
- What is your residence status?
- Please write below

When did you arrive in New Zealand?
- Day  Month  Year

What country were you born in?
- Please write below
Tell us if you have lived or worked overseas

**INFORMATION FOR Q18:**
Periods of overseas residence may:
- affect entitlement to some benefits
- mean you’re eligible for an overseas benefit or pension.
- For more information, phone 0800 777 227.

**HOW TO ANSWER Q18:**
Your reason for being in a country may be that you were there for a working holiday, you were living there, you were born there.

**ATTACHMENT FOR Q20:**
You’ll need to show us proof of these payments, such as a pension certificate.

---

### Have you ever lived or worked in any countries outside of New Zealand?

<table>
<thead>
<tr>
<th>Name of country</th>
<th>Date you entered this country</th>
<th>Date you left this country</th>
<th>Reason for being in this country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

---

### Do you receive or qualify for a social security benefit, pension or allowance from overseas?

<table>
<thead>
<tr>
<th>No</th>
<th>Go to question 21</th>
<th>Yes</th>
<th>Please provide details below</th>
</tr>
</thead>
</table>

**Tick the box that best describes your benefit, pension or allowance**
- Retirement or old age
- Superannuation
- Disability or health condition
- Widow or survivor
- Child or dependent
- War related
- Other

**If you ticked ‘yes’ for question 19, please give details of the payments you get.**

<table>
<thead>
<tr>
<th>Payment 1</th>
<th>Payment 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>What country does the payment come from?</td>
<td></td>
</tr>
<tr>
<td>How much do you get each time the payment is made (in overseas currency)?</td>
<td></td>
</tr>
<tr>
<td>Is this amount before or after tax?</td>
<td></td>
</tr>
<tr>
<td>How often do you get the payment (for example: weekly, fortnightly, monthly)?</td>
<td></td>
</tr>
<tr>
<td>What is the name of your pension, allowance or benefit?</td>
<td></td>
</tr>
<tr>
<td>What is the payment reference number?</td>
<td></td>
</tr>
</tbody>
</table>

---

Tell us if you’re studying

<table>
<thead>
<tr>
<th>Are you a full-time student?</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
</tr>
</tbody>
</table>

---
Tell us about the people in your household

Do you have dependent children in your care?

- [ ] No
- [ ] Yes

**Child 1**

<table>
<thead>
<tr>
<th>Full name</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to you

<table>
<thead>
<tr>
<th>Parent 1: Full name</th>
<th>Parent 2: Full name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Child 2**

<table>
<thead>
<tr>
<th>Full name</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to you

<table>
<thead>
<tr>
<th>Parent 1: Full name</th>
<th>Parent 2: Full name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Child 3**

<table>
<thead>
<tr>
<th>Full name</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to you

<table>
<thead>
<tr>
<th>Parent 1: Full name</th>
<th>Parent 2: Full name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Child 4**

<table>
<thead>
<tr>
<th>Full name</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Relationship to you

<table>
<thead>
<tr>
<th>Parent 1: Full name</th>
<th>Parent 2: Full name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you need to include more than four children in your application, please write these details about each one on a separate sheet of paper, and bring them with this application form.
Tell us about your relationship status

**Definition of a relationship for benefit purposes**

Whether people are single or a couple affects eligibility for certain income assistance and the rate at which we can pay that assistance.

When we work out your entitlement to income assistance, we'll consider you to be in a relationship if you're married, in a civil union, or in a de facto relationship, and have a degree of companionship.

By degree of companionship, we mean two people:

- are committed to each other emotionally for the foreseeable future and
- are financially interdependent on each other.

To give you a better idea of what we mean by this, think about whether your relationship includes some of the things below:

- you live together at the same address most of the time
- you share responsibilities, for example bringing up children (if any)
- you socialise and holiday together
- you share money, bank accounts or credit cards
- you share household bills
- you have a sexual relationship
- people think of you as a couple
- you give each other emotional support and companionship.

**HOW TO ANSWER Q23:**

Tick this statement to confirm you understand the definition of a relationship for benefit purposes.

If you don’t understand what we mean by a relationship please leave this blank until you talk with us.

In the meantime, go to question 28.

---

**Do you understand our definition of a relationship?**

☐ I understand the definition of a relationship for benefit purposes

---

**Do you have a partner?**

☐ No  Go to question 28  ☐ Yes  Your partner needs to complete the Partner form on page 25

---

**What is your partner’s full name?**

---

**What date was your partner born?**

Day  Month  Year

---

**What is your relationship status with your partner?**

Please tick one of the following boxes

☐ Married  ☐ In a civil union  ☐ In a relationship

---

**ATTACHMENT FOR Q27:**

Bring your marriage or civil union certificate for your current relationship.
Tell us about your work in the last 52 weeks

By ‘work’ we mean any employment for which you get paid or get other advantages for, such as free or subsidised board, payments in kind, or drawings from a business.

Are you working?

☐ No  ☐ Yes  Go to question 32

What type of work do you do?

☐ Full-time  ☐ Part-time  ☐ Casual

☐ Seasonal  ☐ Self-employed  ☐ Voluntary

Who are you working for?

Employer’s name

Employer’s contact details

Address

Phone number ( )  Fax ( )

Email

How much are you paid each week?

<table>
<thead>
<tr>
<th>Type of payment (include goods or services)</th>
<th>Amount before tax</th>
<th>Amount after tax</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
<td>$</td>
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<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

28  29  30  31
Tell us about your income and assets

### Did you get income from any of the following sources in the last 52 weeks?

<table>
<thead>
<tr>
<th>Source of Income</th>
<th>No</th>
<th>Yes</th>
<th>Jointly with partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages or salary</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Termination pay</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Redundancy pay</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accident compensation (eg ACC)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income insurance (replacement/protection)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farm or business income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments from self employment or contract work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest from savings, investments, or bonds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dividends from shares, unit trusts, or managed funds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income from rents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments from boarders or flatmates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Support payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income for a child</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintenance payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments from a former partner</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Allowance, scholarship, or Student Loan living cost payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overseas pension, benefit or allowance payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other superannuation or retirement scheme income (government or private)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income from an estate, if you’ve inherited money</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income from trusts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Did you answer ‘yes’ or ‘jointly with partner’ to any of the sources of income listed in question 32?

<table>
<thead>
<tr>
<th>Payment made to?</th>
<th>You</th>
<th>Jointly with partner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
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<td>$</td>
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<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

ATTACHMENT FOR Q32: Bring a copy of your business accounts.

INFORMATION FOR Q32: In this application form, ‘partner’ means the person you’re married to or in a civil union or relationship with, not a business partner.

ATTACHMENT FOR Q33: You need to show us proof of income you have received in the last 52 weeks.
Did you get other types of payment apart from money in the last 52 weeks?

[ ] No  [ ] Yes  Please tell us about the type of payment and its value

<table>
<thead>
<tr>
<th>Type of payment</th>
<th>Where did it come from?</th>
<th>Its value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Do you expect to get income or other payments in the next 52 weeks?

[ ] No  [ ] Yes  Please write the details below. Tell us the before-tax amounts

Where will the payment come from?  Payment made to?  How often do you expect the payment?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Are you involved in a trust, or have you ever been involved in a trust?

‘Involved’ means one or more of the following:

- you’ve set up a trust, usually by making a gift of assets or property
- you’ve sold or gifted assets to a trust
- you make decisions about managing a trust
- you benefit from a trust, for example, by receiving income such as trust distributions.

[ ] No  [ ] Yes  Please write the name of the trust

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
Tell us about your assets

**ATTACHMENT FOR Q37:**
You may be asked to provide proof of your assets and their value.

Do you or your partner have any of the following cash assets?

- Money in bank or other savings
- Bonus Bonds, shares, debentures or stocks
- Money lent to other people or organisations
- Other cash assets

If you answered ‘yes’ to any of the assets listed above, please write the details below.

<table>
<thead>
<tr>
<th>Type of asset</th>
<th>You</th>
<th>Your partner</th>
<th>Jointly owned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**HOW TO ANSWER Q39:**
Examples of property you do not live in include, land, holiday homes, bach/crib, investment properties.

Do you or your partner have any of the following non-cash assets?

- Property you don’t live in
- Boat, caravan or motorhome
- Other

If you answered ‘yes’ to any of the non-cash assets listed above, please write the details below.

<table>
<thead>
<tr>
<th>Type of asset</th>
<th>How much is it worth?</th>
<th>How much do you owe on it?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
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<td></td>
<td>$</td>
<td>$</td>
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<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>
Tell us if you want to apply

Do you want to apply for the Accommodation Supplement?

☐ No  Go to question 57  ☐ Yes

Tell us who you live with

Do you live alone?

☐ No  Please write below the names of the others you live with  ☐ Yes

First name  Surname or family name  Relationship to you

Tell us about rental costs

Do you pay rent?

☐ No  Go to question 49  ☐ Yes

Do you pay rent to Kāinga Ora (formerly Housing New Zealand)?

☐ No

☐ Yes  Go to question 57. You won’t be able to get Accommodation Supplement

What is the total amount of rent paid each week for your home?

$

How much of this total amount do you pay for you and your family?

$

Do you pay water rates separately from your rent?

☐ No  ☐ Yes  Tell us how much you pay

$  How often?

What is the name, address and telephone number of the person or organisation you pay rent to?

Go to question 57
Tell us about board costs

INFORMATION FOR Q49:
By board we mean the amount you pay for your accommodation where it includes food costs and may also include other costs like electricity.

ATTACHMENT FOR Q50:
You may need to show proof of what you pay for board.

Tell us about home ownership costs

HOW TO ANSWER Q53:
Only include mortgages you used to buy or alter your home. Include both interest and principal. List any other mortgages such as a second mortgage or revolving mortgage. Don’t include contents insurance.

ATTACHMENT FOR Q53:
You’ll need to show proof of your home ownership costs.

ATTACHMENT FOR Q54:
Bring receipts for any repair and maintenance costs.

ATTACHMENT FOR Q56:
You’ll need to show proof of your rates rebate.

Do you pay board?

[ ] No  [ ] Yes

Go to question 52
List what costs your board includes

What is the total amount of board you pay each week for you and your family?

$

What is the name, address and telephone number of the person or organisation you pay board to?

Go to question 57

Do you own the home you live in?

[ ] No  [ ] Yes

Go to question 52

What are your home ownership costs?

<table>
<thead>
<tr>
<th>Who do you pay?</th>
<th>How much do you pay?</th>
<th>How often do you make the payment (such as weekly, monthly or yearly)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>First mortgage</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other mortgage</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>House insurance</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Mortgage insurance</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Rates</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Ground lease</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Water rates</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Body corporate fees</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Did you have to pay for repairs and maintenance to your home in the last 12 months?

[ ] No  [ ] Yes

Please write the total amount

Do you have a mortgage from Housing New Zealand?

[ ] No  [ ] Yes

Please write the total amount

Have you received a rates rebate in the last 52 weeks?

[ ] No  [ ] Yes

Amount $ 
Rating year 1 July 2020 to 30 June 2020 

Health and disability costs

This helps with extra costs if you or a family member has a health condition or disability lasting more than six months. We call this payment a Disability Allowance.

Tell us about the person you’re applying for

Do you want to apply for the Disability Allowance?

☐ No  ☐ Yes

If you ticked ‘yes’ to question 57, you’ll also need your doctor or nurse practitioner to fill out the Disability Allowance medical certificate on page 19. You need to complete one for each person you are applying for, so please ask us if you need more.

Who in your family has health-related costs?

☐ You  ☐ Your partner  ☐ Your dependent child

Tell us the name of the children you are applying for

<table>
<thead>
<tr>
<th>First name</th>
<th>Surname</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
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</tbody>
</table>

ATTACHMENT FOR Q58: You need to provide a Disability Allowance medical certificate for each person you apply for.

INFORMATION FOR Q58: You may be able to get a Child Disability Allowance for the same child. Please ask us.

Tell us about any payments you get for these health needs

Do you get payments from private medical insurance for any health-related needs?

☐ No  ☐ Yes  Write the details below

<table>
<thead>
<tr>
<th>What cost is covered</th>
<th>How much?</th>
<th>Name of person the payment is for</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td></td>
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<tr>
<td></td>
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</tr>
</tbody>
</table>

Is this health condition covered by ACC or War Disablement Pension?

☐ No  ☐ Yes  You may not be entitled to a disability allowance

Describe your extra costs

HOW TO ANSWER Q61: Extra costs must be directly related to the health condition. Costs can include medical and prescription costs, medical alarms, lawn mowing, extra power or gas, transport and special equipment.

ATTACHMENT FOR Q61: You’ll need to show proof of these costs.

What extra health-related costs do you have?

<table>
<thead>
<tr>
<th>Type of cost</th>
<th>Cost</th>
<th>How often (such as weekly, monthly, yearly)</th>
<th>Name of person costs relate to</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
The Disability Allowance is available for reimbursement of additional costs arising from a disability where the following criteria are met:
1. The person has a disability which is likely to continue for at least six months; and
2. The disability has resulted in a reduction of the person’s independent function to the extent that:
   • the person requires ongoing support to undertake the normal functions of life, or
   • the person requires ongoing supervision or treatment by a health practitioner.
For the purposes of qualifying for Disability Allowance, a disability means:
• physical disability or impairment
• physical illness
• psychiatric illness
• intellectual or psychological disability or impairment
• any other loss or abnormality of psychological, physiological, or anatomical structure or function (including sensory impairment)
• reliance on a guide dog, wheelchair, or other remedial means
• the presence in the body of organisms capable of causing illness.
The information you provide below is covered by our Privacy Statement which lets clients know we may contact health providers to check the health-related information they give us. For more information go to workandincome.govt.nz and search on Disability Allowance.
Accident
- Burns (190)
- Fractures, dislocations, soft tissue injury (191)
- Poisoning, toxic effects (192)
- Internal injuries (193)
- Injury to the nervous system (194)
- Back pain / injury (195)
- Overuse injury [RSI] (196)
- Complications of medical or surgical care (197)
- Other injury (198)

Other disorders
- Congenital conditions (103)
- Intellectual disability (164)
- Cancer (104)
- Infectious / parasitic diseases (105)
- Musculo-skeletal system disorder (106)
- Respiratory disorders (107)
- Genito-urinary disorders (108)
- Blood and blood forming organs (109)
- Skin disorders (110)
- Digestive system disorder (111)

Please indicate the expected duration of the disability:
- Less than 6 months [There may be no entitlement to Disability Allowance]
- 6 to 12 months
- 1 to 2 years
- 2 to 3 years
- Permanent (never reassess)

Verification of doctor, specialist or nurse practitioner visits

Please list the type, cost and how often visits to doctors, specialists or nurse practitioners are necessary and result from the stated disability:

<table>
<thead>
<tr>
<th>Type of consultation</th>
<th>Cost</th>
<th>How often (eg daily, weekly, monthly,)</th>
<th>Health practitioner’s initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$</td>
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<td></td>
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<tr>
<td></td>
<td>$</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please list the pharmaceuticals, items, services or treatments that are necessary and of therapeutic value for the stated disability:

<table>
<thead>
<tr>
<th>Item / service / treatment / pharmaceutical</th>
<th>Health practitioner’s initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Health practitioner’s verification

Please print your details below.

HPI number

Health practitioner’s full name

Practice name and address

Telephone number (  )

Health practitioner’s signature

Date

Day Month Year
Temporary Additional Support
Temporary Additional Support helps with essential costs for a short time when you’ve tried everything you can think of, and still can’t pay for them.

Tell us if you want to apply

Do you want to apply for Temporary Additional Support?

☐ No  Go to page 25  ☐ Yes

Tell us about any Working for Families tax credits you get

Do you or your partner get any Working for Families tax credits payments from Inland Revenue?

☐ No tax credit  ☐ Family tax credit  ☐ Minimum family tax credit
☐ Parental tax credit  ☐ In-work tax credit

ATTACHMENT FOR Q63:
You’ll need to provide proof of any tax credit.

Please write the details of any tax credit below

<table>
<thead>
<tr>
<th>Type of tax credit</th>
<th>You</th>
<th>Your partner</th>
<th>How often? (For example, weekly, fortnightly)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td></td>
<td>$</td>
<td>$</td>
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<tr>
<td></td>
<td>$</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

Tell us what essential work-related costs you need to pay to keep working

Are you or your partner working?

☐ No  Go to question 66  ☐ Yes

Do you or your partner have any essential costs you have to pay to keep working?

☐ No  ☐ Yes  Please write the details below

ATTACHMENT FOR Q65:
You’ll need to show proof of these costs.

<table>
<thead>
<tr>
<th>Type of tax credit</th>
<th>How much?</th>
<th>How often? (For example, weekly, fortnightly)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Running costs for a vehicle you use to get to and from work</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Repayment costs for a vehicle you use to get to and from work</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Public transport to and from work</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Telephone, if it is a condition of your work</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Childcare</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>
Tell us how much it costs you for the place where you and your family live

INFORMATION FOR Q67:
By rent we mean the amount you pay for your accommodation only and doesn’t include other costs such as food or electricity.

ATTACHMENT FOR Q69:
You’ll need to show proof of what you pay for rent.

66
Are you receiving, or are you applying for, an Accommodation Supplement?

No  Yes  Go to question 81

67
Do you pay rent?

No  Go to question 73  Yes

68
Do you pay rent to Kāinga Ora (formerly Housing New Zealand)?

No  Yes

69
What is the total amount of rent paid each week for your home?

$  

70
How much of this total amount do you pay for you and your family?

$  

71
Do you pay water rates separately from your rent?

No  Yes  Tell us how much you pay

$  How often  

72
What is the name, address and telephone number of the person or organisation you pay rent to?

Go to question 81

INFORMATION FOR Q73:
By board we mean the amount you pay for your accommodation where it includes food costs and may also include other costs like electricity.

ATTACHMENT FOR Q74:
You’ll need to show proof of what you pay for board.

73
Do you pay board?

No  Go to question 76  Yes  List what costs your board includes

74
What is the total amount of board you pay for you and your family?

$  

75
What is the name, address, and telephone number of the person or organisation you pay board to?

Go to question 81
Do you own the home you live in?

☐ No  Go to question 81
☐ Yes

What are your home ownership costs?

<table>
<thead>
<tr>
<th>Who do you pay?</th>
<th>How much do you pay?</th>
</tr>
</thead>
<tbody>
<tr>
<td>First mortgage</td>
<td>$</td>
</tr>
<tr>
<td>Other mortgage</td>
<td>$</td>
</tr>
<tr>
<td>House insurance</td>
<td>$</td>
</tr>
<tr>
<td>Mortgage insurance</td>
<td>$</td>
</tr>
<tr>
<td>Rates</td>
<td>$</td>
</tr>
<tr>
<td>Ground lease</td>
<td>$</td>
</tr>
<tr>
<td>Water rates</td>
<td>$</td>
</tr>
<tr>
<td>Body corporate fees</td>
<td>$</td>
</tr>
</tbody>
</table>

Did you have to pay for repairs and maintenance to your home in the last 12 months?

☐ No
☐ Yes  Please write the total amount $ ...

Do you have a mortgage from Housing New Zealand?

☐ No
☐ Yes  Please write the total amount $ ...

Have you received a rates rebate in the last 52 weeks?

☐ No
☐ Yes  Amount $  Rating year 1 July 20 to 30 June 20 ...

Tell us about other essential costs

☐ No
☐ Yes  Please provide details below

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
<th>How often (for example, weekly, fortnightly)?</th>
<th>Start or purchase date</th>
<th>End date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

If you didn’t apply for the Disability Allowance on page 17 and your costs are health-related, please tell us.
### Do you need a telephone for safety or security reasons, or because of special family circumstances?

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>Please write the details below</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

How much do you pay? $ ____________

How often? (weekly, fortnightly, monthly) ____________

### Tell us what you’ve done to try to pay your essential costs

<p>| |</p>
<table>
<thead>
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<tbody>
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</tbody>
</table>

### What steps have you and your partner taken to get other help, reduce costs, or increase income?

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>
This form should be completed by the partner of the person applying for Extra Help. If you don’t have a partner please go to page 32.

In this form, ‘you’, ‘your’, and ‘yourself’ means the partner of the person applying for Extra Help.

Tell us about yourself

If you’ve received a benefit or extra financial help from us before, write your client number here if you know it. This number can be found on your Community Services Card if you have one.

**Client number**

What is your full name?

- [ ] Mr
- [ ] Mrs
- [ ] Ms
- [ ] Miss
- [ ] Other

First and middle names

Surname or family name

Is the name on your birth certificate the same as above?

- [ ] No
- [ ] Yes

First and middle names

Surname or family name

Have you ever been known by any other name?

- [ ] No
- [ ] Yes

Write them all out below

1.

2.

What name would you like us to call you?

- [ ] The name I wrote in Question 1
- [ ] The name I wrote in Question 2

Write the full amount
Tell us more about you

What date were you born?

Day  Month  Year

Are you:

☐ Male  ☐ Female  ☐ Gender diverse

What is your Inland Revenue tax number?

ATTACHMENT FOR Q7:
Bring a form or letter from Inland Revenue showing your tax number.

What bank account would you want your payments to be paid into?

The account is in the name of:

The account number is:

ATTACHMENT FOR Q8:
You need to provide proof of your bank account details, such as a bank statement or deposit slip.

Tell us how we can contact you

Where do you live?

Flat/House number  Street Name

Suburb

Town/City

Is your mailing address different from where you live?

☐ No  ☐ Yes  Tell us your mailing address

How else can we contact you?

Tick the best way for us to first contact you

Home phone  (  )

Mobile phone  (  )

Other phone  (  )

Fax  (  )

Do you agree to get emails from us?

☐ No  ☐ Yes  Tell us your mailing address  ☐ I don’t have an email address

HOW TO ANSWER Q9:
If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

HOW TO ANSWER Q10:
Mailing address can include a PO Box, rural delivery details, or C/O address.

HOW TO ANSWER Q11:
Please only give us contact details you’d like us to use.
Tell us your ethnicity

INFORMATION FOR Q13:
We collect this information for statistics we use in research and future development work.

Tick the group(s) you most identify with.

- Māori
- Which tribe(s) or iwi? [Please write below]
- New Zealand European
- Niuean
- Samoan
- Indian
- Other European
- Tolelauan
- Tongan
- Chinese
- Cook Island Māori
- Other
- Please write below
- Don’t want to answer

Tell us about your residence status

HOW TO ANSWER Q14:
This means you consider New Zealand your home, you’re a legal resident, you usually live here and you intend to stay.

Do you usually live in New Zealand?

- No
- Yes

What best describes your residence status in New Zealand? Tick only one box.

- New Zealand citizen by birth [Go to question 18]
- Granted New Zealand citizenship [Date citizenship granted: Day Month Year] [Go to question 16]
- Granted permanent residency [Date permanent residence granted: Day Month Year] [Go to question 16]
- Other [What is your residence status?]

When did you arrive in New Zealand?

[Day Month Year]

What country were you born in?

[Please write below]
Tell us if you’ve lived or worked overseas

INFORMATION FOR Q18:
Periods of overseas residence may:
• affect entitlement to some benefits
• mean you’re eligible for an overseas benefit or pension.
• For more information, phone 0800 777 227.

HOW TO ANSWER Q18:
Your reason for being in a country may be that you were there for a working holiday, you were living there, you were born there.

ATTACHMENT FOR Q20:
You’ll need to show us proof of these payments, such as a pension certificate.

Have you ever lived or worked in any countries outside of New Zealand?

☐ No  Go to question 21  ☐ Yes  Please provide details below

<table>
<thead>
<tr>
<th>Name of country</th>
<th>Date you entered this country</th>
<th>Date you left this country</th>
<th>Reason for being in this country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>/ /</td>
<td>/ /</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Do you receive or qualify for a social security benefit, pension or allowance from overseas?

☐ No  Go to question 21

☐ Yes  Tick the box that best describes your benefit, pension or allowance

☐ Retirement or old age  ☐ Superannuation  ☐ Disability or health condition
☐ Widow or survivor  ☐ Child or dependent  ☐ War related
☐ Other

If you ticked ‘yes’ for question 19, please give details of the payments you get.

<table>
<thead>
<tr>
<th>What country does the payment come from?</th>
<th>Payment 1</th>
<th>Payment 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the name of your pension, allowance or benefit?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What is the payment reference number?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Payment 1

How much do you get each time the payment is made (in overseas currency)?

Is this amount before or after tax?

How often do you get the payment (for example: weekly, fortnightly, monthly)?

If you ticked ‘yes’ for question 19, please give details of the payments you get.
Tell us about your work in the last 52 weeks

By ‘work’ we mean any employment for which you get paid or get other advantages for, such as free or subsidised board, payments in kind, or drawings from a business.

Tell us about your current work

Are you working?

☐ No  ☑ Yes  

Go to question 25

What type of work do you do?

☐ Full-time  ☐ Part-time

☐ Casual  ☐ Seasonal

☐ Self-employed  ☐ Voluntary

Who are you working for?

Employer’s name

Employer’s contact details

Address

Phone number (   )  Fax (   )

Email

How much are you paid each week?

<table>
<thead>
<tr>
<th>Type of payment (include goods or services)</th>
<th>Amount before tax</th>
<th>Amount after tax</th>
</tr>
</thead>
<tbody>
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HOW TO ANSWER Q22:
By full-time, we mean you generally work at least 30 hours a week.
By part-time, we mean you generally work at least 15 hours a week.

HOW TO ANSWER Q23:
If you have more than one job please record details of your other employers on a separate sheet of paper.
For each job include the information asked for in questions 22 to 24.

HOW TO ANSWER Q24:
Include the amount you’re paid and also the value of things you get from your employer instead of money.
If your income varies week to week – provide an average (for example the average of your last four weeks pay).
Tell us about your income in the last 52 weeks?

ATTACHMENT FOR Q25:
Bring a copy of your business accounts.

INFORMATION FOR Q25:
In this application form, ‘partner’ means the person you’re married to or in a civil union or relationship with, not a business partner.

Did you get income from any of the following sources in the last 52 weeks?

Tick one box in each line below

Wages or salary
Termination pay
Redundancy pay
Accident compensation (eg ACC)
Income insurance (replacement/protection)
Farm or business income
Payments from self employment or contract work
Interest from savings, investments, or bonds
Dividends from shares, unit trusts, or managed funds
Income from rents
Payments from boarders or flatmates
Child Support payments
Other income for a child
Maintenance payments
Payments from a former partner
Student Allowance, scholarship, or Student Loan living cost payments
Overseas pension, benefit or allowance payments
Other superannuation or retirement scheme income (government or private)
Income from an estate, if you’ve inherited money
Income from trusts
Other

ATTACHMENT FOR Q26:
You need to show us proof of income you have received in the last 52 weeks.

Did you answer ‘yes’ or jointly with partner’ to any of the sources of income listed in question 25?

Tell us the total before-tax amounts, for the last 52 weeks

Where did the income come from? | Payment made to? You | Jointly with partner
---|---|---
| $ | $ |
| $ | $ |
| $ | $ |
| $ | $ |
**How to answer Q27:**
Other types of payment include advantages such as free or subsidised goods and services (for example, free food, subsidised accommodation).

Did you get other types of payment apart from money in the last 52 weeks?

- [ ] No
- [ ] Yes

**Please tell us about the type of payment and its value**

<table>
<thead>
<tr>
<th>Type of payment</th>
<th>Where did it come from?</th>
<th>Its value</th>
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**How to answer Q28:**
How often do you expect the payment, such as weekly, fortnightly, monthly, one-off.
The types of income you need to include here are listed on page 30.

Do you expect to get income or other payments in the next 52 weeks?

- [ ] No
- [ ] Yes

**Please write the details below. Tell us the before-tax amounts**

<table>
<thead>
<tr>
<th>Where will the payment come from?</th>
<th>Payment made to?</th>
<th>Jointly with partner</th>
<th>How often do you expect the payment?</th>
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<tbody>
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<td>You</td>
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**Are you involved in a trust, or have you ever been involved in a trust?**

‘Involved’ means one or more of the following:
- you’ve set up a trust, usually by making a gift of assets or property
- you’ve gifted or sold assets to a trust
- you make decisions about managing a trust
- you benefit from a trust, for example, by receiving income such as trust distributions.

- [ ] No
- [ ] Yes

**Please write the name of the trust**


Privacy Statement

The Ministry of Social Development includes Work and Income, MSD Housing Assessment, Senior Services, StudyLink and other service lines. The legislation administered by the Ministry of Social Development allows us to check the information that you give us. This may happen when you apply for assistance and at any time after that. The Privacy Act 1993 requires us to tell you why we collect the information and what we will do with it.

Why we collect information

The information you give us is collected under the authority of the legislation administered by the Ministry of Social Development and will be held by the Ministry of Social Development.

The information is collected for the purposes of the legislation administered by the Ministry of Social Development including:

- granting benefits and other assistance under the Social Security Act 2018
- delivering superannuation services under the New Zealand Superannuation and Retirement Income Act 2001
- delivering assistance under the Veterans’ Support Act 2014
- providing services under the Residential Care and Disability Support Services Act 2018
- statistical and research purposes
- providing advice to Government
- providing support and services for you and your family
- providing education related services
- care and protection needs of children
- assessing eligibility for social housing and calculating income-related rents under the Housing Restructuring and Tenancy Matters Act 1992
- assessing whether you and/or your partner may be entitled to an overseas pension, benefit or allowance.

You are not required to give the Ministry of Social Development information, but if you do not give us all the information we ask for, your application for benefits or pensions and other assistance may be declined.

We may contact health practitioners

The Ministry of Social Development may contact health practitioners to check any health related information you give us.

We may use information for public housing

Information you give us when you apply for assistance, and at any time after that, may also be used for public housing purposes under the Housing Restructuring and Tenancy Matters Act 1992, including reviewing your eligibility for social housing or your income-related rent.

Public housing is subsidised housing available to people in the greatest need of housing for the duration of their need. It is provided by Housing New Zealand and approved community housing providers.

We may compare the information you give us with information held by other agencies

The information you give us may be compared with information held by other agencies such as Inland Revenue, the Ministry of Justice, Department of Corrections, New Zealand Customs Service, Department of Internal Affairs, Accident Compensation Corporation, Housing New Zealand Corporation, Ministry of Health and Immigration New Zealand. It may also be compared with social security information (for example, pension or benefit information) held by other governments (including Australia, Malta and the Netherlands).

We may share information with Inland Revenue

Under the Tax Administration Act 1994, if you have dependent children, the information you give us may be shared with Inland Revenue for the purpose of administering Working for Families Tax Credits. Inland Revenue may also:

- use the information for the purposes of child support, student loans and taxation
- disclose it to the Ministry of Business, Innovation, and Employment, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
- disclose your personal information to your partner.

We may give information to service providers, employers, public housing providers and childcare providers

The Ministry of Social Development may:

- give employers information about you if you use our employment services
- share information with childcare centres to administer your entitlement to childcare assistance
- give information about you to the Tertiary Education Commission, Workbridge, training providers, career services or other agencies that have a formal agreement to provide services on behalf of the Ministry of Social Development, if you use our employment services
- share information about you with public housing providers (such as Housing New Zealand) to administer your housing-related assistance.

We may use your information to give you a better service

Other information that you give us that is not required to assess your entitlement may be used to provide a better service to you.

You have the right to see and correct your information

Under the Privacy Act 1993 you have the right to ask to see all information we hold about you and to ask us to correct that information.
Let us know when things change

You need to let us know about changes that might affect the amount you’re paid, like:

- starting, stopping or changing jobs
- starting or finishing part-time or full-time study
- changes to your pay or other income, including getting an overseas pension
- starting to run a business (for yourself or someone else).

Changes to information about you or your family, like:

- name, address, contact details or bank account number
- starting or ending a relationship, marriage, or civil union
- a partner passes away
- the number of children in your care, including having another baby.

We also need to know if you:

- are travelling overseas
- go into or come out of hospital
- are being held in custody or on remand.

Your rights

If you don’t think we have things right or there’s something you don’t understand:

- call us – we can usually fix it over the phone
- you have the right to ask us to review the decision. Find out how at msd.govt.nz/reviews

Signature

- I’ve answered all the questions that apply to me and my situation
- I understand the changes I need to let you know about
- The information I’ve given you is true and complete
- I understand what you do with my personal information and how you protect my privacy.
Obligations and signature
Applicant’s copy

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<th>Applicant’s name (print)</th>
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