



FY 22-23 Martidja Banyjima Rental Support Form

Member details — This section must be completed

To be eligible for this assistance, an applicant must be a registered Martidja Banyjima (non-IBN) beneficiary.

IVIe	Members full name (including middle name)																										
Dat	Date of birth Contact phone number																										
		/			/																						
	This is my current number, please update my record																										
	This is a temporary number, please do not update my record																										
The	The following are my current contact details and should be updated on my record.																										
	Tick	if 'ye	es'																								
Res	Residential address																										
Sub	uburb															State				Postcode							
Pos	Postal address (if different to address above)																										
Sub	urb																			Stat	е			Post	code		
Ema	ail add	dress	3																_				-				

Rental Assistance										
Pay Direct — Landlord	Pay D	irect – Real Estate Ag	ent	Pay Direct –	Depar	tment of	Hous	ing A	ccour	t
Available						Bene	ficia	ry all	lowai	ice
Rental Support						L	p to	\$20),000	
Details of request: (note; no cas	h payments or	reimbursements to	beneficiaries are	allowed)						
Items		Supplier	Phone		nvoice Vo.	e/Quote	An	noun	t	
						Total				
Comments:										
Checklist of required dod	cuments									
Copy of signed lease agreemer	t with beneficia	ry listed as the tenant								
Copy of tax invoice / statemer f any supporting documentation has application. BNTAC will make severapplication will lapse and become interactivate the application. Updated states.	not been include ral attempts to c active. If the me	ed BNTAC will contai contact the member. If mber wishes to procee	ct the member to a a response is not le ed with the applica	advise. This m received from	ay del the m	ay proces: ember wi	sing o thin o	of the ne m	onth,	
Declaration										
declare that the information I have	provided above i	s true, complete and a	accurate.							
authorise BNTAC to speak to any nterested parties without explicit co			n. BNTAC will no	t provide con	fidentia	al or sens	tive i	nforn	natior	to
understand that, in accordance wi	h the Banjima C	haritable Trust Deed,	no cash payments	or reimburse	ments	can be m	ade t	o me	or ar	У
Signature										
V				Date						
^] / [/			
					J					
ni isi sa										
Please send the completed form t Email: ms@bntac.org.au	0:									
Fax: 08 9216 9898										

Post: BNTAC, PO Box 6278 WA, 6892

In person: Level 1/165, Adelaide Terrace, East Perth WA 6004

For further information please contact BNTAC on 9216 9888