

Application for Additional Safety Features form

Complete this form if you wish to apply to the Department of Housing and Community Development for additional safety features to be added to your rental property.

If this application is approved the department will add these safety features to the property with no cost to you.

Please complete the form in BLOCK LETTERS. You will need to attach any support documents you have with your form. You can lodge these, along with your completed form to your local housing office.

Office use only
Received by:
Group no:
Asset no:
CPTED complete: <input type="checkbox"/> Yes (attached) <input type="checkbox"/> No
<small>*If CPTED has not been completed please contact PHSO's to arrange.</small>

Do you need an interpreter to help you with this form? Yes No

If yes, what language do you speak?

Kuongea nasi katika lugha nyingine mbali na Kiingereza, pigia simu huduma ya ukalimani kwa 131450
Para falar conosco em outro idioma além do inglês, chame o serviço de intérprete no 131450.
Para falar conosco em outro idioma além do inglês, chame o serviço de intérprete no 131450.
Muốn nói chuyện với chúng tôi bằng các ngôn ngữ khác ngoài tiếng Anh, hãy gọi dịch vụ thông dịch qua điện thoại số 131450.
หากต้องการสนทนากับเราในภาษาอื่นที่ไม่ใช่ภาษาอังกฤษ กรุณาโทรไปที่บริการสามทางโทรศัพท์ หมายเลข 131450
ທຸກທີ່ភាសາອື່ນ ເຮົາມາພາກສ່ວນທີ່ຮ່ວມຮຽນພາສາເຢັ່ງເຢັ່ງເຮົາມາພາກສ່ວນທີ່ຮ່ວມຮຽນພາສາ ສູງຈາກຈະເລີນພາກສ່ວນທີ່ຮ່ວມຮຽນພາສາ ທາຍເລຍ: **131450 ຫາຍ**
තුරුສິට්ຕິສුද ອອດໂລບິວາວາວາວາວາວາວາວາ ວາວາວາວາວາວາວາວາ ແປວາວາວາ ຕວາວາວາວາວາວາວາ ວາວາວາວາວາວາວາ ອອດໂລບິວາວາວາວາວາວາວາວາ ທູວາວາວາວາວາວາວາວາ ທູວາວາວາວາວາວາວາວາ
Untuk berbicara dengan kami dalam bahasa lain yang bukan bahasa Inggris, hubungi layanan juru bahasa telpon di 131 450.
لكي تتمكن من التحدث معنا بلغات غير الإنجليزية، اتصل بخدمة الترجمة الهاتفية على الرقم 131450.

1 Applicant details			
Please circle: Mr / Mrs / Ms / Miss			
First name(s):			
Last name:			
Address of the property you are requesting safety features for:			
Home phone:		Work phone:	
Mobile phone:		E-mail address:	

Why are you requesting safety features?	

2	What safety features are you requesting?	
<input type="checkbox"/> Additional lighting	<input type="checkbox"/> Internal solid core doors	<input type="checkbox"/> Phone line in bedroom
<input type="checkbox"/> Tree/bush removal	<input type="checkbox"/> Fencing modifications	<input type="checkbox"/> Lockable power meter
<input type="checkbox"/> Other: Please specify feature		

3	Supporting Documents	
What relevant support documents can you attach to your application?		
<input type="checkbox"/> restraining order	<input type="checkbox"/> letter from my doctor	<input type="checkbox"/> letter from a support worker
<input type="checkbox"/> letter from a refuge	<input type="checkbox"/> notification from police	<input type="checkbox"/> letter from a domestic violence legal service
<input type="checkbox"/> Other: _____	<input type="checkbox"/> no support documents*	
*The department may ask for an appointment to discuss your application. Support documents will help the department assess your application more quickly.		

4	Support Agency
Will a Support Agency be assisting you with this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes please name _____
Do you want the department to liaise with this agency regarding this application?	<input type="checkbox"/> Yes (complete Authorisation To Disclose Personal Information form) <input type="checkbox"/> No <input type="checkbox"/> Not Applicable

5 Statement of Privacy

The Department of Housing and Community Development collects only that personal information which is necessary to provide housing assistance under the *Housing Act* and its regulations. If you do not provide the information we may not be able to provide you with assistance. The information collected will not be disclosed to anyone without your consent unless it is required or authorised by law or necessary for maintenance, debt recovery, housing policy and research purposes in accordance with the Information Privacy Principles scheduled in the *Information Act*. You have a right to access and correct any information about you.

If you have any queries or concerns please contact the Information Management Unit on 8999 8490 or write to GPO Box 4621, Darwin NT 0801.

Signature		Date	
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