



ACT Revenue Office
Department of Treasury

Application Form
First Home Owner Grant Scheme

UIN
Application reference
Application received by
Date lodged

SECTION 1 ELIGIBILITY CRITERIA

NOTES Read the guide to the application for the meaning of any terms used in the application. This application will not be considered unless it is signed and lodged with the required supporting evidence. Applications must be lodged within 1 year after the **completion date** of the **eligible transaction**. Eligibility is determined at the date of lodgment of the application. All **applicants** and their **partner** must be considered when answering the eligibility questions.

ELIGIBILITY CHECKLIST

1	Is this the first time each applicant and/or their partner will receive a grant under the <i>First Home Owner Grant Act 2000</i> anywhere in Australia? NOTE You may be eligible for a further grant if you repaid an earlier grant – see FHOG004	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Does each applicant and their partner declare that before 1 July 2000 he/she has never owned a residential property anywhere in Australia either jointly, separately or with some other person? NOTE Applicants are not eligible for a grant if they or their partner have held a relevant interest in residential property prior to 1 July 2000, even if they have never occupied the property.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3A	Does each applicant and their partner declare that he/she has never occupied residential property anywhere in Australia in which they acquired a relevant interest either jointly, separately or with some other person, on or after 1 July 2000 but before 1 January 2004?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3B	Does each applicant and their partner declare that he/she has never occupied residential property anywhere in Australia for a continuous period of at least 6 months in which they acquired a relevant interest either jointly, separately or with some other person, on or after 1 January 2004?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Is each applicant an individual (e.g. not a company or trust except a trustee for a person with a legal disability) and at least 18 years of age? NOTE An individual under 18 years of age may still be eligible – contact the ACT Revenue Office.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Is at least one applicant an Australian citizen or permanent resident at the time of making the application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Will at least one applicant be occupying the home as their principal place of residence for a continuous period of at least 6 months, with the period of occupation starting within 1 year after the completion date of the eligible transaction ? NOTE: From 17 February 2010, where there are joint applicants and at least one applicant will comply with the residency requirements, there is no requirement for the Commissioner to exempt a non-complying applicant .	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Has each applicant on or after 1 July 2000, either: <ul style="list-style-type: none"> entered into a contract for the purchase of a home in the ACT; or entered into a contract to build a home built in the ACT; or in the case of an owner builder – commenced constructing a home in the ACT (i.e. laying the foundations)? 	<input type="checkbox"/> Yes <input type="checkbox"/> No

Approved Agent / ACT Revenue Office use only			
All evidence sighted: <input type="checkbox"/> Yes <input type="checkbox"/> No	Person sighting the evidence:	Signature: Date:	Payment eligibility date: (enter settlement, completion or first draw down date only)

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DETERMINATION OF ELIGIBILITY

If you answered YES to all of the above questions, you may be entitled to receive the First Home Owner Grant subject to the written decision of the **Commissioner**. If you answered NO to any question, you may still be eligible if a discretion is exercised in your favour (see section C of the guide).

SECTION 2 APPLICANT DETAILS

NOTE All **applicants** must complete this section. If there are more than two **applicants**, complete and attach an additional application form. Each **applicant** must sign the declaration in section 6 of the form. A **shared equity partner** is excluded from the requirement to be an **applicant** to the grant provided that, on completion of the transfer of the property to which the application relates, the **shared equity partner** will have an interest of 50 per cent or less in the property.

Number of applicants (how many persons will have a relevant interest in the property?)	<input type="text"/>
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Related or associated party transactions (are any of the applicants or their partners related to or associated with the vendor or builder? If yes, provide evidence of the consideration paid)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Indigenous Australian (are any of the applicants Aboriginal or Torres Straight Islander?) NOTE Answering this question is optional. The information collected will only be used for statistical purposes by Commonwealth, State and other Territory Governments and will have no bearing on your application	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	Applicant 1 (Contact Applicant)	Applicant 2
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr
First name	<input type="text"/>	<input type="text"/>
Middle name(s)	<input type="text"/>	<input type="text"/>
Family name	<input type="text"/>	<input type="text"/>
If different from above:		
Name on birth certificate First name	<input type="text"/>	<input type="text"/>
Middle name(s)	<input type="text"/>	<input type="text"/>
Family name	<input type="text"/>	<input type="text"/>
Have you ever used any name other than the name(s) declared above?	<input type="checkbox"/> Yes – list name(s) below <input type="checkbox"/> No	<input type="checkbox"/> Yes – list name(s) below <input type="checkbox"/> No
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
Date of birth	<input type="text"/>	<input type="text"/>
Place of birth State/Territory	<input type="text"/>	<input type="text"/>
Country	<input type="text"/>	<input type="text"/>
Daytime telephone number	(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>
Email address	<input type="text"/>	<input type="text"/>

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Current residential address	Street number	Street number
	Street name	Street name
	Suburb	Suburb
	State Postcode	State Postcode

Address for service of notices (if different from above)	Street number	Street number
	Street name	Street name
	Suburb	Suburb
	State Postcode	State Postcode

Do you have a partner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, will your partner have a relevant interest in the home?	<input type="checkbox"/> Yes – your partner must complete the details as Applicant 2 above	<input type="checkbox"/> No – you must complete section 3	<input type="checkbox"/> Yes – your partner must complete the details as an applicant	<input type="checkbox"/> No – you must complete section 3

Tick the States and/or Territories in which you have lived	NSW	ACT	NT	QLD	SA	TAS	VIC	WA
	<input type="checkbox"/>							

SECTION 3 NON-APPLICANT PARTNER DETAILS

NOTE To be completed by the **applicant** where the **partner** of an **applicant** is not listed as an **applicant** in section 2. The non-**applicant partner** must also sign the declaration in section 7.

		Non-applicant Partner of Applicant 1	Non-applicant Partner of Applicant 2
Title		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr
First name			
Middle name(s)			
Family name			
If different from above:			
Name on birth certificate	First name		
	Middle name(s)		
	Family name		
Date of birth		<input type="text"/>	<input type="text"/>
Place of birth	State/Territory		
	Country		

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10. I have read and understood the information in the guide prepared by the ACT Revenue Office relating to the conditions of eligibility. I accept that if the conditions of eligibility are not met, I may not be entitled to receive or retain the grant.
11. I authorise the ACT Revenue Office to access and exchange information about me to verify my eligibility for the First Home Owner Grant with the **approved agent** (where applicable), State, Territory and Australian Government agencies, and commercial organisations, as permitted by law.
12. I understand that the **approved agent** is not authorised by the ACT Revenue Office to offer any advice or assistance on the conditions of eligibility for the grant, or on the completion of this application.
13. I authorise the ACT Revenue Office to deposit the grant into the account nominated in section 5 (ensure account details are correct) or into the **approved agent's** nominated account (where applicable).
14. I authorise the **approved agent** to hold the grant until the completion of the **eligible transaction** and to repay the grant to the **Commissioner** if the transaction is not completed within 28 days of the date specified.
15. I authorise the **Commissioner** to address all correspondence relating to this application to Applicant 1 at the address nominated.
16. I acknowledge that if I am not entitled to the grant I may be required to repay the grant, and may be liable for a penalty of up to the amount of the grant, and interest. I further acknowledge that I may also be prosecuted under the *Criminal Code 2002* (ACT) for making a false or misleading statement in or in connection with this application.

I declare that the statements contained herein and the supporting documentation provided are true and correct in every particular.

	Applicant 1	Applicant 2
Name		
Signature		
Date		
Before me (signature of witness)		
Full name and address of witness (A witness must not be an applicant or a partner of an applicant and must not be related to the applicant or his/her partner)	Name	Name
	Street number/name	Street number/ name
	Suburb	Suburb
	State	State
	Postcode	Postcode

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SECTION 7 DECLARATION BY NON-APPLICANT PARTNER OF APPLICANT

1. The **partner** details in section 3, in so far as they relate to me, are true and correct.
2. I have not previously received and retained a grant under the *First Home Owner Grant Act 2000* (ACT) or under a corresponding Act in any State or other Territory, either alone or together with any other person or persons.
3. I have not owned a **home** or held a **relevant interest** in a **residential property** within Australia, either jointly, separately or with some other person, prior to 1 July 2000.
4. I have not owned and occupied a **residential property** within Australia in which I acquired a **relevant interest**, either jointly, separately or with some other person, on or after 1 July 2000 but before 1 January 2004.
5. I have not owned and occupied, for a continuous period of at least 6 months, a **residential property** within Australia in which I acquired a **relevant interest**, either jointly, separately or with some other person, on or after 1 January 2004.
6. I authorise the ACT Revenue Office to access and exchange information about me to verify my **partner's** eligibility for the First Home Owner Grant with the **approved agent** (where applicable), State, Territory and Australian Government agencies, and commercial organisations, as permitted by law.
7. Although I am not an **applicant** for the grant, I have read and understood the reasons in the guide for me having to make this declaration.
8. I acknowledge that I may be prosecuted under the *Criminal Code 2002* (ACT) for making a false or misleading statement in or in connection with this application.

I declare that I have read and understood the above information and that the statements contained herein and the supporting documentation provided are true and correct in every particular in so far as they relate to me.

	Partner of Applicant 1	Partner of Applicant 2
Name		
Signature		
Date		
Before me (signature of witness)		
Full name and address of witness (A witness must not be an applicant or a partner of an applicant and must not be related to the applicant or his/her partner)	Name	Name
	Street number/name	Street number/ name
	Suburb	Suburb
	State Postcode	State Postcode

GIVING FALSE OR MISLEADING INFORMATION IS A SERIOUS OFFENCE
(section 338 *Criminal Code 2002*)

PRIVACY STATEMENT

All information collected by the ACT Revenue Office is protected by secrecy provisions in Acts administered by the Office and only used for the purposes of those Acts. In addition, personal information provided to the ACT Revenue Office is protected by the *Privacy Act 1988* (Cth). Information (including personal information) is not disclosed to any third party unless authorised by law or with the consent of the person involved.

Checklist—Documents to be Lodged with Application Form—First Home Owner Grant Scheme

SECTION 8 CHECKLIST

Complete the checklist to ensure the required supporting documents are attached to your application.

To ensure your application is processed in a timely manner, ensure it is fully completed, signed and dated.

Your application will not be accepted if it is not fully completed and/or the required supporting documents are not attached. Additional documents may be requested after lodgment of your application.

Proof of identity of all applicants and their partners (only provide certified copies)	Tick if attached	Office use only
Category 1 — type:	<input type="checkbox"/>	<input type="checkbox"/>
Category 2* — type:	<input type="checkbox"/>	<input type="checkbox"/>
Category 3* — type:	<input type="checkbox"/>	<input type="checkbox"/>
Category 4* — type:	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Certificate of divorce, marriage certificate, death certificate, change of name certificate, other 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Statutory declaration for persons who are separated 	<input type="checkbox"/>	<input type="checkbox"/>
Contract to purchase a home (only provide certified copies)		
<ul style="list-style-type: none"> • Certified copy of Contract for Sale, dated and signed by the vendor 	<input type="checkbox"/>	<input type="checkbox"/>
Where there is no contract, or the sale of the property is between family members or related parties :		
<ul style="list-style-type: none"> • Stamped and dated copy of the transfer signed by both parties 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence that consideration has been paid* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence of total value of property (house and land) 	<input type="checkbox"/>	<input type="checkbox"/>
Contract to build a home (only provide certified copies)		
<ul style="list-style-type: none"> • Certified copy of contract to build dated and signed by all parties 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Title search showing the applicant(s) as the registered proprietor(s)* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Copy of receipt for foundations* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence of first progress payment after deposit* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence of the unencumbered value (land only) 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Certificate of Occupancy issued by ACT Planning and Land Authority* 	<input type="checkbox"/>	<input type="checkbox"/>
Owner builder (only provide certified copies)		
<ul style="list-style-type: none"> • Title search showing the applicant(s) as the registered proprietor(s)* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Copy of receipt for foundations* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence of first progress payment after deposit* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Certificate of Occupancy issued by ACT Planning and Land Authority* 	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Evidence of the total value of the property (house and land) 	<input type="checkbox"/>	<input type="checkbox"/>

* Not required if application is lodged with an **approved agent**