



Visitors to your approved Rent Allowance (RA) property may affect the amount of RA you receive. This is dependent on the length of their stay and whether they have a permanent home at another location. If your visitor is staying for a period of four (4) weeks or longer you must complete this form.

| | | | | | |
|-------------------------|----------------------------------|----------------------------------|-----------------------------|------|----------------------|
| Service number | <input type="text"/> | Employee ID | <input type="text"/> | Rank | <input type="text"/> |
| Family name | <input type="text"/> | Initials | <input type="text"/> | | |
| Current unit/base | <input type="text"/> | | | | |
| Contact phone number(s) | Work () <input type="text"/> | Home () <input type="text"/> | Mobile <input type="text"/> | | |

Current residential address

| | |
|----------------------------|-------------------------------|
| <input type="text"/> | |
| <input type="text"/> | |
| State <input type="text"/> | Postcode <input type="text"/> |

Please list ALL visitors currently staying at your residence. Do not include Defence recognised dependants.

List the dates they occupied and/or vacated and their permanent address. If no other permanent address, indicate 'No other permanent address'.

| | | | |
|-------------------|--|-----------------|----------------------|
| Name | <input type="text"/> | Start occupancy | <input type="text"/> |
| Permanent address | <input type="text"/> | End occupancy | <input type="text"/> |
| | <input type="text"/> | | <input type="text"/> |
| | State <input type="text"/> Postcode <input type="text"/> | | <input type="text"/> |

| | | | |
|-------------------|--|-----------------|----------------------|
| Name | <input type="text"/> | Start occupancy | <input type="text"/> |
| Permanent address | <input type="text"/> | End occupancy | <input type="text"/> |
| | <input type="text"/> | | <input type="text"/> |
| | State <input type="text"/> Postcode <input type="text"/> | | <input type="text"/> |

| | | | |
|-------------------|--|-----------------|----------------------|
| Name | <input type="text"/> | Start occupancy | <input type="text"/> |
| Permanent address | <input type="text"/> | End occupancy | <input type="text"/> |
| | <input type="text"/> | | <input type="text"/> |
| | State <input type="text"/> Postcode <input type="text"/> | | <input type="text"/> |

| | | | |
|-------------------|--|-----------------|----------------------|
| Name | <input type="text"/> | Start occupancy | <input type="text"/> |
| Permanent address | <input type="text"/> | End occupancy | <input type="text"/> |
| | <input type="text"/> | | <input type="text"/> |
| | State <input type="text"/> Postcode <input type="text"/> | | <input type="text"/> |

| | | | |
|-------------------|--|-----------------|----------------------|
| Name | <input type="text"/> | Start occupancy | <input type="text"/> |
| Permanent address | <input type="text"/> | End occupancy | <input type="text"/> |
| | <input type="text"/> | | <input type="text"/> |
| | State <input type="text"/> Postcode <input type="text"/> | | <input type="text"/> |

Declaration by member

- The information I have provided in this form is true and accurate.
- I am aware that the giving of false or misleading information, documents or statements to Defence Housing Australia or the Department of Defence is a serious offence under the *Commonwealth Criminal Code 1995* and the *Defence Force Discipline Act 1982* and that this legislation imposes substantial penalties, including imprisonment, for committing these offences.
- I understand that any entitlements provided to me as a result of such conduct may be recovered.

Signature
Date