

**Sackley, Pip**

---

**From:** Melanie <Hill>  
**Sent:** Tuesday, 24 February 2009 2:20 PM  
**To:** @defence.gov.au  
**Subject:** RE: Days Leave [SEC=UNCLASSIFIED]

hi  
 mark is currently at lunch, when he returns i will put this email to him.  
 kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia  
 Unit 43 level 1, Fremantle malls  
 27-35 William street, Fremantle Wa 6160  
 Fax: (08) 9210 3461 Tel: (08) 9210 3404  
 melanie.hill@dha.gov.au

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**From:** [mailto: @defence.gov.au]  
**Sent:** Tuesday, 24 February 2009 12:58 PM  
**To:** Hill, Melanie  
**Subject:** Days Leave [SEC=UNCLASSIFIED]

UNCLASSIFIED

Hi Melanie,

I am putting in leave for my move this friday, then subsequently the Tuesday and Wednesday the next week. My boss has asked me why I am not entitled to a removal ("IAW PACMAN")...I have tried to explain the situation, though he claims I am entitled. I realise that this move to a DHA SR is a privilage, and i dont want to step on too many toes. I am not worried about the move costs itself, though the 2 or so days leave etc. is what my Warrant Officer is questioning...as so not to take leave from my earned days. Is there a way, or some more advice on what my response could be to explain this unique sitation, and therefore am I entitled to those days off for removal? Obviously if i am entitled to the Free Days for removal, is there some other paperwork to be taken to the Pay and Leave office (WRITERS).

Sorry to keep bugging you,

**IMPORTANT:** This email remains the property of the Australian Defence Organisation and is subject to the jurisdiction of section 70 of the Crimes Act 1914. If you have received this email in error, you are requested to contact the sender and delete the email.

**Sackley, Pip**

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**From:** Hill, Melanie  
**Sent:** Friday, 13 February 2009 12:31 PM  
**To:** @defence.gov.au; @bigpond.com;  
**Subject:** FW: paperwork

hi

we need from you a NOR form (notification of relocation) filled out so we can create a case for your housing. you can get one from the dha website but I have attached one for you. it will be a self move.



NOR Form.pdf

kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia

Unit 43 level 1, Fremantle malls

27-35 William street, Fremantle Wa 6160

Fax: (08) 9210 3461 Tel: (08) 9210 3404

melanie.hill@dha.gov.au

# Notification of Relocation

## Member Expense

**If you are relocating at your own expense within your posting locality, please complete this form before relocating.**

Collection, storage and use or disclosure of personal information is subject to the Information Privacy Principles set out in section 14 of the *Privacy Act 1988*.

Defence Housing Australia (DHA) will collect and use or disclose the information you provide to arrange any of the following services which you may require:

- issuing access to HomeFind
- finding a permanent accommodation solution.

DHA usually gives some or all of the information to the Department of Defence. Defence is not permitted to use or disclose your personal information, without your consent, for a purpose other than the purpose for which the information was given to them.

Your personal information may also be given to your spouse or de facto or to other organisations on a need to know basis for reasons such as law enforcement or in connection with legal proceedings.

These organisations include:

- Centrelink
- Australian Taxation Office
- Commonwealth or State Departments/Agencies (where there is an obligation to provide it)
- Department of Families, Community Services and Indigenous Affairs
- Law enforcement agencies including the police.

**Please answer all relevant questions.** This will enable DHA to process this application on time to meet your housing requirement. Please call your local DHA Housing Management Centre if you require assistance with this form.

**PART A – Personal details** - All questions must be completed.

**PART B – Relocation details** - Please complete relevant questions.

**PART C – Housing considerations** - Please complete relevant questions.

**PART D – Other considerations** - Please complete, if applicable.

**PART E – Storage** - Please complete relevant questions.

**PART F – Rent Allowance** - To be completed by Members requiring Rent Allowance.

**PART G – Declaration** - Must be completed by all Members.

Return the completed Notification of Relocation - Member Expense form to your local DHA Housing Management Centre.

**Keep a photocopy of the completed form for your records.**



# Notification of Relocation

## Member Expense

1. Are you relocating at your own expense?

No ☐ **Don't use this form. You will need to complete an *Application for Relocation* form.**  
 Yes ☐ Please complete all relevant details below.

### PART A - Personal details

2. Employee ID number

3. Service Number

4. Title/Rank

5. Full name

Family name

Given name(s)



6. Service

Navy

☐

Reserve

☐

Army

☐

Other

☐


Air Force

☐

Foreign Defence  
Exchange personnel

☐

Country

7. Date of birth

 /  / 

8. Gender

Male

☐

Female

☐

9. Address details

**Current residential address**



State

Postcode

**Postal address**

As above

☐



State

Postcode

**Work address**

Position/Job title

Unit

Base

Unit location

Street address

**Telephone number**

 Home (     )

 Work (     )

**Fax number**

 Home (     )

 Work (     )

**Mobile**

**Email**

 Home

 Work



## PART B - Relocation details

### 10. Change in personal circumstance (CIPC)

Please attach supporting documentation as advised by your local DHA Housing Management Centre.

Marriage/De facto/Interdependent recognition	<input type="checkbox"/>
Recognition of special needs	<input type="checkbox"/>
Exchange of service residence	<input type="checkbox"/>
Own means to service residence/Live in Accommodation	<input type="checkbox"/>
Change in dependant status	<input type="checkbox"/>
Rent Allowance approval	<input type="checkbox"/>
Other	<input type="text"/>

### 11. Required date for housing

### 12. Date of entry/enlistment

### 13. Have you previously served in the ADF?

No ☐

Yes ☐

Dates of previous service

 to 

### 14. Your categorisation for housing.

Select ONE only

**MWD**

**Member with Dependants**  
i.e. a Defence Member who maintains a home for dependants and who occupies the home with at least one dependant

☐

Date MWD categorisation recognised by ADF

Place

**MWD(U)**

**Member with Dependants (unaccompanied)** i.e. a Defence Member who maintains a home for dependants and who is separated from them for service recognised reasons

☐

Address where your spouse and/or dependants live/reside

  

State

Postcode

Go to Question 17

**MWOD**

**Member without Dependants**  
i.e. a Defence Member who is not MWD or a MWD (U)

☐

Go to Question 17

### 15. MWD only

Details of your spouse/partner

Family name

Given name(s)

ADF or APS member No ☐

Yes ☐

Employee ID/AGS number

Navy ☐

Army ☐

Air Force ☐

Reserve ☐

APS ☐

Current rank/grade

**Note:** The senior ranking member must complete this form.



**16. MWD only**

Do you have any dependants who will accompany you on this relocation?

No ☐ **Go to Question 17**

Yes ☐ Please provide their details below  
(If more than six dependants please provide details on separate sheet.)

**Dependant 1**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>

**Dependant 2**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>

**Dependant 3**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>

**Dependant 4**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>

**Dependant 5**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>

**Dependant 6**

Family name	Date of birth	What type of school does this dependant attend?
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	Does not attend school <input type="checkbox"/>
Given name(s)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Infants/primary <input type="checkbox"/>
<input type="text"/>		Secondary <input type="checkbox"/>
Relationship to you (e.g. son, daughter)	<input type="text"/>	Tertiary <input type="checkbox"/>



**PART C - Housing Considerations****17. What is your current residential arrangement?**

- Live in Accommodation (LIA) ☐
- Service Residence (SR) ☐
- Own Home ☐ **Contract of sale required**
- Rent Allowance (RA) ☐ **Cease Rent Allowance form required**
- Other (Own Means) ☐

**18. Date you will be vacating** /  / **19. What type of permanent housing do you require?**

DHA staff aim to provide you with an accommodation solution that takes into account your Defence entitlement and family composition and, where possible your preferences, however, the solution is dependent on available options.

- MWD** Service Residence (SR) ☐ **Go to Question 20**
- Rent Allowance (RA) ☐ **Go to Question 23**
- MWOD** Live in Accommodation (LIA) ☐ **Go to Question 23**
- MWD(U)** Rent Allowance (RA) ☐ **Go to Question 23**
- I will be occupying
- Own Home** ☐ **Go to Question 26**
- Other** ☐ **Go to Question 26**

**20. Preferred type of permanent accommodation**

Tick one only

- Standard house ☐
- Unit/Townhouse ☐

**21. Do you have a preferred area to live in the new location?**

- No ☐
- Yes ☐ List suburbs in order of preference

1 <input type="text"/>	3 <input type="text"/>
2 <input type="text"/>	4 <input type="text"/>

**22. Do you have any pets?**

- No ☐
- Yes ☐ Type of pet (e.g. cat, dog) Sex Desexed Yes No Age Breed and size (small, medium, large)
- |                      |                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

**23. Do you, or any member of your dependent family, own or part own, a residential property in this posting locality?**

**Note:** You may not have an entitlement to subsidised housing assistance if you own a residential property in your posting locality. Contact your local DHA Housing Management Centre for more information.

If more than one property please provide details on separate sheet.

- No ☐
- Yes ☐ Address of the residential property
- Number of bedrooms

State  Postcode

**Do you intend to live at this residential address in this postal locality?**

- No ☐ Reason
- Yes ☐ Date of intended occupancy  /  /

**Is this residential property currently tenanted?**

- No ☐ Yes ☐ Date lease expires  /  /

Is there a Release Clause? No ☐ Yes ☐



**24. MWD only**

Give a brief summary and attach a copy of *Recognition, Family with Special Needs Letter*, as approved by Defence Community Organisation (DCO).

Not applicable ☐ Yes ☐ Please state your special needs requirements for housing

This could include specific job requirements, which will assist in determining your housing requirements, and may require Defence approval.

No ☐ Yes ☐ Please describe

**26. Do you have any items currently in storage at Commonwealth expense?**

This entitlement will be reviewed.

No ☐

Yes ☐ Location of the items (e.g. city and state)


**Do you require continued storage of these items?**

Yes ☐

No ☐ Preferred delivery date

/ /

Delivery address

State	Postcode



## PART F - Rent Allowance

27. Are you applying for Rent Allowance?

No ☐  
Yes ☐

Go to **PART G - Declaration**

28. Do you have your CO/OC's permission to live off base?

**Note:** LIA policy now directs that certain members may be required to live in. (refer to PACMAN Chapter 7)

No ☐  
Yes ☐

Do not proceed until approval is confirmed

Was/is any Live in Accommodation held in your name? No ☐ Yes ☐

Date Live in Accommodation handed back

/ /

Comments

29. Reason you are applying for Rent Allowance

Live in Accommodation not available ☐

Suitable Service Residence not available ☐

SGT (E) to WO or MAJ (E) or higher rank ☐

Five years aggregate continuous full-time ADF service completed ☐

(Note: Your date(s) of enlistment must be completed at Questions 12/13)

Only levels 1, 2 or 3 Live in Accommodation are available ☐

Other circumstances – please give details ☐

30. Do you currently receive Rent Allowance?

No ☐  
Yes ☐

Address of the property where you currently receive Rent Allowance

State	Postcode

31. Will you be occupying a commercial boarding house?

No ☐  
Yes ☐

**Note:** Boarding in a private home does not constitute boarding for the purpose of calculating Rent Allowance.

32. Address of the rental property/commercial boarding house you will occupy

State	Postcode

Number of bedrooms

33. What is the term of the lease?

From

to

Date you occupied, or will occupy the property

34. Is there a standard Defence Release Clause included in your lease?

No ☐  
Yes ☐

State reason why




**35. What is the total rent for the property?**

If you are **sharing the property with someone else** please put the total amount for the property, **not** the amount that you individually pay.

If occupying a **commercial boarding house** please put the amount **you** will pay.

\$  Per week  Per fortnight  Per month

**36. Are you the sole occupant of the property for which you are applying for Rent Allowance?**

No ☐ Yes ☐

**Note:** MWD — do not include dependants.

**Note:** All other occupants of the premises, whether a civilian (including children) or ADF Member, including house sitters, will normally be regarded as sharing the premises unless they have a more permanent residence in another locality and are no more than visitors or they are transient and thus temporary co-residents (see PACMAN Chapter 7).

**Details of the people with whom you share the property**

(If you are occupying a commercial boarding house go to Question 39)

Service/Employee ID (if applicable)	Rank or title (if applicable)	Name	Rent contribution
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

**37. MWD only**

**Do you wish to elect the 2 bedroom ceiling appropriate to your rank and pay the applicable contribution?**

No ☐

Yes ☐

**Note:** Members choosing the 2 bedroom ceiling will not be eligible for ceiling increases, and this election applies for the term of the lease (for more information about this option, contact DHA).

**38. MWOD and MWD(U) only**

**Will you be claiming furniture rental?**

No ☐

Yes ☐

Furniture rental per week \$

**Note:** This is a separate claim. Furniture rental such as white goods, beds, dining suite etc will be calculated as part of your rent, limited to your ceiling. A contract and a receipt are required (for more information about this option, contact DHA).

**Continue over page**



## Application for bond, rent and utility connection deposit in advance

### Optional

39. Do you wish to apply for an advance payment for bond, rent and utility allowance?

No ☐

Yes ☐

Bond

\$

Rent

\$

Limited to the lesser of four weeks rent or ceiling

Utility connection deposit

\$

**Note:** Proof of payment must be provided to your local HMC within 14 days of receipt of advance requested.

**I understand that any advances specified above must be repaid to the Commonwealth, and I agree to do so:**

*(Please tick preferred method)*

☐

by fortnightly instalments directly from my pay over the term of the lease

☐

in full at the end of the tenancy

**(Note:** If you choose this option, the total amount of the advance will be recouped from your pay in one payment. Please contact DHA if you intend to take up this option.)

**I understand that any monies still owed to the Department of Defence from an advance as outlined above, will be recovered in full upon cessation of my Rent Allowance.**

Signature of Member



Date

/ /

### 40. Statement

**Please confirm your understanding of Rent Allowance requirements by reading and ticking each box.**

If unsure please ask your DHA consultant.

☐

I understand that I must provide DHA with the following supporting documentation in respect to this application:

- Copy of the signed lease (residence/furniture)
- The initial receipt, detailing:
  - Name of the owner/agent to whom the rental payments are made
  - Amount of the rental and the period of payment (must include period of any rent in advance)
  - Date of payment
  - The address of the premises
- Bond and Utility receipt (if applied for Bond or Utilities advance)

☐

I understand that my Rent Allowance will not be processed if I fail to provide the documentation within 14 working days of the submission of my application.

☐

I undertake to advise DHA and my Commanding Officer in writing of any changes to the details provided in this form within 10 days of the change.

☐

I understand that my Rent Allowance may be audited one or more times in a posting cycle, and that I must respond within 14 days or my Rent Allowance will be suspended.

☐

I have received/sighted a copy of the *Guide to Rent Allowance*.

☐

I undertake to provide DHA with a **Cease Rent Allowance** form and **final rent receipt** to enable the cessation of my Rent Allowance when vacating.

Signature of Member



Date

/ /



## PART G - Declaration

### 41. Declaration by Member

**Please confirm your understanding by reading and ticking each box.**

If unsure please ask your DHA consultant.

- ☐ I understand that DHA will collect, store and use or disclose information contained in this form for the purposes set out on the first page.
- ☐ I acknowledge that it is DHA's usual practice to give some or all of my personal information (including relocation details) to the agencies and organisations identified on the first page.
- ☐ 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 the DHA is a serious offence under the *Commonwealth's Criminal Code 1995* and the *Defence Force Discipline Act 1982* and that this legislation imposes substantial penalties, including imprisonment, for committing these offences. Any entitlement provided to me as a result of such conduct may be recovered.
- ☐ I acknowledge that I need approval to live outside the posting locality – this approval from the CO/OC needs to be provided to DHA.

Signature of Member



Date

/ /



**Sackley, Pip**

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**From:** Hill, Melanie  
**Sent:** Tuesday, 17 February 2009 2:56 PM  
**To:** @defence.gov.au; @bigpond.com;  
**Subject:** Housing Confirmation Letter-

hi  
please find attached a copy of your housing confirmation letter.  
if you can please sign and return the back page in acceptance of the property



Housing  
Confirmation Le...

thanks and kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia  
Unit 43 level 1, Fremantle malls  
27-35 William street, Fremantle Wa 6160  
Fax: (08) 9210 3461 Tel: (08) 9210 3404  
melanie.hill@dha.gov.au

03 July 2014

Rockingham WA 6169

Dear

## **HOUSING CONFIRMATION LETTER**

Thank you for your selection of a DHA service residence. The purpose of this letter is to confirm the details of your housing solution.

### **Property Details**

#### **Address**

**Port Kennedy WA 6172**

Property Group Rent Scheme: **RB1 (A)**

Rent contribution per fortnight: **\$311.32 (includes \$7.90/fn water excess)**

Date property available to occupy: **27 February 2009**

#### **Welcome Visit**

Our Relocation Coordinator will contact you to arrange a Welcome Visit at the house prior to the delivery of your furniture. The aim of the Welcome Visit is to ensure you are completely happy with your new home. The visit will take approximately one hour. The Consultant will walk you through a condition report, complete the Defence Residence Agreement and handover the keys to your new home. Please note that only the serving member can sign the Defence Residence Agreement and therefore should be in attendance at the welcome visit.

#### **Delivery**

A request for door-to-door delivery of your furniture and effects for **27 February 2009SAP** thereafter has been requested with Toll Transitions. Toll Transitions will contact you to advise of your confirmed date of delivery. (Please note this date is not yet confirmed and only if you are entitled to a removal).

PLEASE NOTE: On the day that your furniture and effects are delivered to your new home you are required to vacate your temporary accommodation. Please confirm a check out time with your hotel reception.

**Please indicate at the bottom of this letter your acknowledgement and confirmation of the property detail and conditions.** Then return this letter to the Perth HMC, or via fax on (08) 9210 3460 or in the reply paid envelope enclosed as soon as possible (do not send Fast Connect Form in envelope).



### **Fast Connect**

As part of the relocation service to you, arrangements for your electricity, gas, telephone, internet and Pay TV to be disconnected at your current location and reconnected at your gaining locality. This can be made by a company known as Fast Connect.

This fantastic Fast Connect service is free, which is offered through DHA to improve the quality of your move. If you wish to use this service, please complete the enclosed form\* and return to Fast Connect by post, fax or internet as follows:

- By return freepost (no stamp required) to the following address:  
FAST CONNECT  
REPLY PAID 270  
WEST PERTH WA 6872
- Fax the form to Fast Connect via 1300 663 900.
- Use the easy Fast Connect link on HomeFind or the DHA web page (<http://www.dha.gov.au>).

Please note that if you have any Fast Connect questions, you should contact Fast Connect directly, phone 1300 661 464 (local call cost around Australia)

I trust that your relocation will be successful and we look forward to assisting you in any way that we can upon your arrival into Perth. If you require any further assistance, please do not hesitate to contact me on (08) 9210 3418. Office hours are 8.30am – 5.00pm Monday to Friday.

Yours sincerely,

Melanie Hill  
Relocations consultant  
Defence Housing Australia

\*Enclosed: Fast Connect form and reply paid envelope

✂-----

I \_\_\_\_\_  
Rank Initials Surname

\_\_\_\_\_ **port kennedy Wa 6172** \_\_\_\_\_  
Service Residence Address

\_\_\_\_\_ **27/02/2009** \_\_\_\_\_ ,  
Proposed Occupation Date

*\* Please return slip to DHA Perth prior to you moving into the Service Residence.*

Confirm Service Residence selection? (circle one)	Member's Signature	Date
YES / NO		

**Attention: Melanie (when completed & returned to DHA Perth)**



**Sackley, Pip**

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**From:** Hill, Melanie  
**Sent:** Friday, 13 February 2009 3:52 PM  
**To:** @bigpond.com;  
**Subject:** nousing

hi

I had a chat with mark, there are 2 scenarios. if you get married, the entitlement may be in jeopardy because:

1: the unit would become officially suitable housing in your posting locality, so then it would need to be deemed unsuitable. OR

2: you could rent it out long term or sell it, it would not jeopardise the SR entitlement in any way

kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia

**Unit 43 level 1, Fremantle malls**

**27-35 William street, Fremantle Wa 6160**

**Fax: (08) 9210 3461 Tel: (08) 9210 3404**

**melanie.hill@dha.gov.au**

**Sackley, Pip**

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**From:** Hill, Melanie  
**Sent:** Friday, 13 February 2009 12:30 PM  
**To:** @defence.gov.au;  
**Subject:** paperwork

hi

we need from you a NOR form (notification of relocation) filled out so we can create a case for your housing. you can get one from the dha website but I have attached one for you. it will be a self move.



NOR Form.pdf

kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia

Unit 43 level 1, Fremantle malls

27-35 William street, Fremantle Wa 6160

Fax: (08) 9210 3461 Tel: (08) 9210 3404

melanie.hill@dha.gov.au



**Sackley, Pip**

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**From:** Hill, Melanie  
**Sent:** Thursday, 12 February 2009 12:03 PM  
**To:** @defence.gov.au;  
**Subject:** property i

h

please find photos attached for

**warnbro**



060599-1.jpg.JPG



060599-2.jpg.JPG



060599-3.jpg.JPG



060599-4.jpg.JPG



060599-5.jpg.JPG



060599-6.jpg.JPG



060599-7.jpg.JPG



060599-8.jpg.JPG



060599-9.jpg.JPG



060599-10.jpg.JPG

kind regards,

**Melanie Hill / Allocations consultant**

Defence Housing Australia

Unit 43 level 1, Fremantle malls

27-35 William street, Fremantle Wa 6160

Fax: (08) 9210 3461 Tel: (08) 9210 3404

[melanie.hill@dha.gov.au](mailto:melanie.hill@dha.gov.au)







8 846













8 8:52







8 8:48







0 045









