

Privacy – Defence Housing Australia (DHA) is collecting your personal information in accordance with the *Privacy Act 1988* (Privacy Act) to provide housing services to Defence members. It is your responsibility to read the following detailed information before proceeding:

- *DHA privacy collection notice* – <https://www.dha.gov.au/docs/default-source/privacy/collection-notice---defence-member-and-dependents.pdf>
- *Privacy Policy* – <https://www.dha.gov.au/policies/privacy>

PART A – Business from home request

IMPORTANT: It is the responsibility of the applicant to ensure they have undertaken due diligence and associated checks on operating a business from home, DHA is unable to provide advice on the requirements to support the application. DHA's role is to facilitate the application between applicant and landlord.

Section 1 – Applicant's details

Provide details of the person operating the business

Title	<input type="text"/>		
Given name	<input type="text"/>	Middle initial	<input type="text"/>
Family name	<input type="text"/>		
Relationship to Defence Member	<input type="text"/>		
Phone numbers	Home <input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		

Section 2 – Defence member details

Given name	<input type="text"/>	Middle initial	<input type="text"/>
Family name	<input type="text"/>		
Employee ID	<input type="text"/>		

Section 3 – Property details

Property ID (if known)	<input type="text"/>		
Physical address	<input type="text"/>		
	<input type="text"/>		
	Suburb	State	Postcode
Is this property located on-base?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	

Section 4 – Business details

Business name	<input type="text"/>		
ABN	<input type="text"/>	ACN	<input type="text"/>
Director/Manager name	<input type="text"/>		
Local authority consulted?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	
		If yes, provide local authority name	
		<input type="text"/>	

Business details continued

Public liability insurer	<input type="text"/>	
Public liability policy number	<input type="text"/>	Expiry date <input type="text"/>
Asset insurer (if applicable)	<input type="text"/>	
Asset policy number	<input type="text"/>	Expiry date <input type="text"/>
Type of business	<input type="checkbox"/> Beauty (Hair, waxing, massage and other beauty services) <input type="checkbox"/> Dance/Fitness (Gym, personal trainer) <input type="checkbox"/> Childcare/family daycare <input type="checkbox"/> IT or Bookkeeping <input type="checkbox"/> Sales <input type="checkbox"/> Party planner <input type="checkbox"/> Tutoring <input type="checkbox"/> Pet care <input type="checkbox"/> Photography <input type="checkbox"/> Other – Please specify <input type="text"/>	
Will employees work from the property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	If yes, WHS coverage must be supplied
Will clients/customers be required to attend the property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	If yes, please specify approximate numbers and frequency <input type="text"/>
Will the business operate in a designated area of the property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	If yes, please specify <input type="text"/>
Will commercial equipment be used?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Commercial equipment means any device that is used for commercial activities, including, but not limited to, medical, laboratory, commercial cooking appliances and entertainment equipment. If yes, please specify <input type="text"/>
Will chemicals be stored on the property?	No <input type="checkbox"/> Yes <input type="checkbox"/>	If yes, please specify chemical and quantity <input type="text"/>

Section 5 – Modifications

Modifications

Will any modifications, fixtures or fittings need to be made to the property to accommodate the operation of the business?	No <input type="checkbox"/> Yes <input type="checkbox"/>	Go to Section 6
Details of the modifications required	<input type="text"/>	
Reason for modifications e.g. council regulations	<input type="text"/>	

Any requests for modifications to make the premises suitable for the operation of the business will be considered as part of the consent and no modifications are to occur prior to the consent being granted.

The occupant acknowledges and agrees that these modifications will be at their expense and will be required to be reinstated to a professional standard on vacation.

Section 6 – Application documentation

If you have any of the following documentation to support your request please attach to the application.
If Landlord consent is provided for the operation of the business the below relevant documentation will be required prior to commencing the business from home.


- Certificates of currency
- Public liability insurance
- Any licence or permit required to operate the business
- Local council approvals and planning approvals which are applicable to the type of business being operated
- Any other relevant insurance requirements (i.e. Insurance of equipment and professional indemnity insurance where required)
- Strata or community titled properties, that all requirements under the strata or community scheme by-laws are met

Section 7 – Declaration

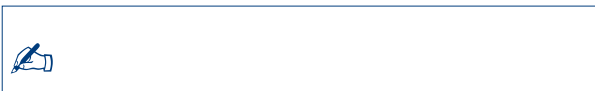
By signing this agreement, I agree to the following terms:

- I am responsible to maintain any and all applicable insurances, approvals and any other compliance obligations that relate to the operation of the business at the Service residence including public liability insurance of at least \$10 million for any single event.
- If requested I will provide DHA with copies of relevant documents, policies and approvals. Failure to provide the items may result in DHA reviewing the ongoing compliance with this agreement.
- I am responsible for the cost of any modifications, and to reinstate to a professional standard upon cancellation of this agreement or vacation of the property.
- I am responsible for rectifying any non-fair wear and tear or accelerated deterioration of the property, including fixtures and fittings.
- I am responsible for the actions and omissions of any person that I permit into the Service residence.
- The ongoing operation of a business at the premises must be in accordance with the requirements of any relevant authority, including the local council or other governing body.
- I have not relied upon any representations made by DHA.
- The consent, if granted, will be based on the information provided by me at the time of submission.
- DHA must be notified of any changes to these details, and I understand that any changes may void the current consent.
- The consent is not transferrable to any other party or premises.
- Consent may be granted subject to any conditions.
- This agreement may be revoked by DHA giving 21 days written notice if the above conditions are not complied with.
- I understand my personal information is being collected by DHA and will be stored, used and disclosed by DHA for the purposes outlined in the *DHA privacy collection notice*. and DHA's Privacy Policy.

**Applicant's
signature**

A rectangular box containing a small icon of a hand holding a pen, indicating where the applicant should sign.

**Defence member's
signature**

A rectangular box containing a small icon of a hand holding a pen, indicating where the defence member should sign.

Return this form and any supporting documents:

- by submitting and tracking an **online** enquiry via your Online Services account at <https://online.dha.gov.au/>

PART B – Outcome of request (to be completed by DHA)

The business from home request has been facilitated by DHA

BFH reference number

Conditional consent has been provided for this request subject to the below:
Application has been conditionally approved *

Reason

* The business cannot operate until full consent has been provided.

In order to finalise your application all relevant documentation (if not already provided) relating to the business operation is required such as:

- Public liability insurance
- Any licence or permit required to operate the business
- Local council approvals and planning approvals which are applicable to the type of business being operated
- Any other relevant insurance requirements (i.e. Insurance of equipment and professional indemnity insurance where required)
- Strata or community titled properties, that all requirements under the strata or community scheme by-laws are met.

Request has been declined by the Landlord

Reason

Date

PART C – Final consent (to be completed by DHA)

Final consent has now been provided

Effective from

Please ensure compliance with both the requirements outlined in this agreement and the Defence Housing Australia Residence Agreement, as signed by you.

DHA signature

