Application Form

* indicates a required field

About the program

The **Resilient Homes Program - Central West** (RHPCW) helps communities recover from disasters. It also makes eligible homes in high-risk areas more resilient to the impacts of future disasters. The program is being delivered by the NSW Reconstruction Authority (RA).

The RHPCW was established in response to severe weather events that caused flooding in parts of New South Wales. The Central West area faced two major events in 2022:

- AGRN 1030 Southern and Central West NSW Severe Weather and Flooding from 4 August 2022 onwards; and
- AGRN 1034 NSW Severe Weather and Flooding from 14 September 2022 onwards

Homeowners in the NSW Central West LGAs of Cabonne, Forbes, Lachlan, Parkes, and parts of Cobar LGA (parishes of Guagong, Booberoi, Euabalong, Erinbendery, and Whoey) that were impacted by the 2022 events can apply for the program.

The <u>RHPCW Program Guidelines</u> outline the objectives, available funding, including grant values where applicable, criteria, assessment processes, and indicative timeframes of the RHPCW.

For further information on the RHPCW, please visit www.nsw.gov.au/resilienthomesprogram

Submitting an application

Information requested in this form will help the NSW Reconstruction Authority assess eligibility for the Resilient Homes Program - Central West.

Please fill in all the mandatory sections (as marked with an *), and the remaining sections to the best of your knowledge.

Please note, additional detailed information may be sought later but we can commence our process with these details in the first instance.

We're here to help. If you need any assistance completing and/or returning this form, please contact us on 1800 844 085 or resilienthomesprogram@reconstruction.nsw.gov.au

If you require accessible resources to complete this form please call 1800 844 085

Program Name
This field is read only. The program this submission is in.
Application Number
This field is read only. The identification number for this submission.

Privacy confirmation

How we collect and use your personal information

You are providing this personal information so that the New South Wales Reconstruction Authority can process your application.

The personal information you provide, including any health information you provide, will be used for the following purposes:

- confirming receipt of your Resilient Homes Program (RHP) registration,
- assessing your RHP registration,
- determining your eligibility under the RHP
- contacting you to discuss your RHP application
- linking your RHP application to other RA programs you have applied to for assistance, or which you may be eligible to receive assistance from,
- assisting you with any enquiries or complaints,
- carrying out audit and compliance activities in relation to the delivery of the RHP and your participation in the RHP,
- determining any other available disaster relief programs that are fully or partially funded by the NSW Government or the Australian Government, for which you may be eligible, and
- inviting you to participate in voluntary evaluation of the RHP.,

Your personal information will be kept private and confidential when it is not being used for the purposes set out above. It will be stored and protected appropriate to the sensitivity of this information and will not be used for any other purpose without your prior consent. Subject to any other legal requirements regarding information retention, your information will be retained for seven years.

How we share your personal information

RA will use your personal information for the purposes for which it was collected or a directly related purpose.

Your personal information may be shared:

- · within RA,
- with RA contractors and service providers,
- with NSW Government Agencies, organisations or companies partnering with the RA to deliver the RHP, including Service NSW,
- with local councils, (for example, we may need to share your personal information with a council as part of approving, assessing feasibility of, and/or facilitating Resilient Measures works at your home or to provide you with other support relating to the RHP).
- with building professionals (for example, builders, architects, engineers, certifiers), building subcontractors, or another entity that is assessing, scoping, inspecting or carrying etc out Resilient Measures works at your home.

The RA may additionally need to share your personal information with other government and non-government partners not listed here. We will only share your personal information where it relates to the purposes listed above or to a directly related purposes,

The RA will not disclose your personal information to anybody else unless required or authorised by law, such as by court order.

More information

Form Preview

This privacy notice applies to the information you provide in your application form, and other information you have provided, or will provide, to the RA for the purposes of processing your application

If you would like to know more about how the New South Wales Reconstruction Authority meets its regulatory obligations in collecting, using, sharing and storing personal and health information, you can read their complete Privacy Policy or Privacy Management Plan

You have the right to access your personal information held by or on behalf of the New South Wales Reconstruction Authority, without excessive delay or expense. You also have the right to have your personal information corrected if it is inaccurate or out-of-date.

If you would like to access or correct your personal information, please contact the New South Wales Reconstruction Authority by emailing info@reconstruction.nsw.gov.au

You may also contact the New South Wales Reconstruction Authority if you have any questions about this privacy notice.

Privacy confirmation *

 \square I confirm that the information I will provide is accurate and directly relevant to the completion of this form, and if I provide the personal information of another person, I have obtained that person's consent to do so and to submit this form.

Please read the privacy collection notice for more information about how we handle your information.

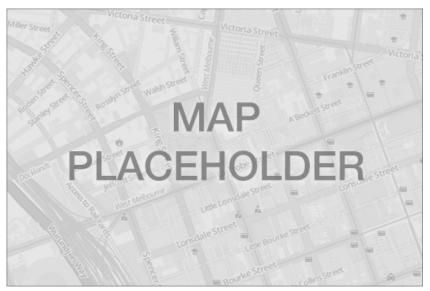
Property Details

* indicates a required field

Property Information

The following information is sought to inform eligibility assessment for the **Resilient Homes Program - Central West.**

Address of the affected property being registered for Resilient Homes Program - Central West *
Address



This address should be the residence where funding is being requested

Identified Local Government Area

The field is automatically populated based on the registered property address.

Is the property address in one of the following LGAs? *

- Cabonne Shire
- Forbes Shire
- Lachlan Shire
- Parkes Shire
- Cobar Shire

Please select the LGA as listed above.

Cobar Shire Council

The property address you have listed is within **Cobar Shire Council.** At this time, only properties within the parishes of Guagong, Booberoi, Euabalong, Erinbendery, and Whoey are eligible for funding under this program.

If your property is outside of these parishes and you wish to continue with your application, please note that only properties in the specified parishes will progress to assessment.

Ineligible LGA

The property address you have listed is outside of the identified LGAs for **Resilient Homes Program - Central West.** At this time, your property is not eligible for funding under the program. If you wish to continue with your application please note that only properties in the identified LGAs will progress to assessment.

Would you like to	continue with	this application?
Yes		\cap No

Additional Property Information

If known - Lot Numb	er, Deposited Plan o	or Strata Plan	
Places include all land no	arcals that form part of th	e property being registered	4
riease iliciade ali ialia po	arceis that form part of th	e property being registered	1.
	ood events in the Ce he property occupie	entral West from the 4 d? *	August 2022
 Owner occupied 		 Vacant property 	Other:
	someone other than the homeowner		
For example, other types		nants, other family member	r etc.
Upload evidence of Attach a file:	occupancy at the tin	ne of the flood event	
For example, utility bill o	r lease agreement, from	the time of the flood event.	
	elling primarily used	d for residential accor	nmodation? *
O Yes For example if not prima	rily residential accommod	O No dation, a home business or	other secondary purpose
If No, please specify	the dwelling use:		
	_		
Owner occupied	currently occupied? Occupied by 	Vacant property	Other:
O owner occupied	someone other than the homeowner	Vacant property	O dilei.
For example, other types		nants, other family member	r etc.
Upload evidence of Attach a file:	current occupancy		
For example, most recen	t utility bill or current lea	se agreement.	
	al dwellings are on t		
O 1 Definition of a residentia purposes.	l dwelling: any dwelling th	O 2 or more nat is primarily used for res	idential accommodation
		perty? * nt □ Modular home □	Manufactured home
Select all that apply.			
Is the primary resid ○ Yes	ential dwelling a 'mo	oveable dwelling'? *	

Form Preview

Attach a file:

Definition of moveable dwelling: (a) any tent, or any caravan or other van or other portable device (whether on wheels or not), used for human habitation, or (b) a manufactured home, or (c) any conveyance, structure or thing of a class or description prescribed by the regulations (under the Local Government Act 1993) for the purposes of this definition.

Was the dwelling lawfully constructed? ↑ Yes ↑ No	、 ○ Not sure
For example, was the appropriate planning approvidevelopment consent or other building approval.	
Was the property directly damaged by e the flood events in the Central West from ○ Yes	ither flood waters or landslide caused by m 4 August 2022 onwards? * No
Upload evidence that the property was o Attach a file:	lamaged, if available
For example, reports prepared as part of recovery	assistance or photos.
Are there any current limitations to prop The dwelling or property is unsafe The property is currently undergoing cons There are pets/animals/livestock that are Other: Please select any that apply.	struction works
Have you undertaken any raising, retrof O Yes If yes, additional information will be requested late	it or rebuild works since 4 August 2022? * O No er.
At the time of the flood events (4 Augus onwards), was the property insured? * O Yes	t 2022 onwards and 14 September 2022
Insurance Information	
Upload evidence of insurance policy vali November 2022 flood event Attach a file:	d at the time of the August and/or
Please ensure insurance policy documentation included coverage was applicable at the time of the flood e	udes the type of insurance, sum insured and if flood vent.
Has an insurance claim been made for day August and/or November 2022 flood eve	nt? *
○ Yes	
Upload evidence of insurance claim payr	nent or insurance works, if available.

Form Preview

For example, claim finalisation letter, cash settlement letter or monetary scope of works documentation.

Applicant Details

* indicates a required field

Homeowner Information

Homeowner information should be entered as per the Certificate of Title for the registered property address. The **Primary Homeowner** must be named on the Certificate of Title. Where there is more than one homeowner, you may provide details of **Additional Homeowners** and indicate which of the listed homeowners will be the preferred contact person for this application.

If you are submitting this application on behalf of the homeowner/s, you must provide the homeowners information then nominate yourself as the contact person. Alternatively, the homeowner may wish to nominate an alternate contact for this application.

The nominated contact does not need to be listed on the Certificate of Title, providing they are authorised by the homeowner to act on their behalf.

Primary homeowne	r name *		
○ Individual	 Organisation 		
Organisation Name	_		
3			
First Name	Last Name		
Please use the legal nar	ne as per the title deed an	d/or drivers licenc	e.
Primary homeowne	r phone number *		
	· phone namber		
Must be an Australian p	hone number.		
	contact number either Mo	bile or Landline	
Primary homeowne	r omail		
Filliary Homeowile	i Ciliali		
Must be an email addres	SS		
	dress you would like to rec	eive corresponde	nce from NSW RA
rease ase are eman aa	aress you would like to rec	cive con coponaci	nee nom nov to
Daga tha mainsanah		-f	d of control *
	omeowner have a pro		
Phone	Email	Mail	No Preference
Is there more than	one homeowner for t	his property? *	k
○ Yes		∩ No	
© 1.65		0 110	
Use the supership	of the officered was	اء ادمسمام براس	the fleed over±2 *
•	or the aπected prope	•	ince the flood event? *
○ Yes		○ No	

If Yes, please advise reason for change in	n ownership
For example: deceased estate, sale of property, co	urt order
What are the current living arrangement ○ The homeowner is living in the registered ○ The homeowner is living in other accomme	property
Homeowner Postal Address	
Homeowner Postal Address *	
Address	
P.O Box or Postal Address - If email is not available	correspondence will be mailed to this address
The Box of Postal Madress in email is not available	, correspondence will be malica to this address.
Additional Homeowner Information	
Please provide information about the addition	al homeowner listed on the Certificate of Title.
Additional homography	
Additional homeowner name * First Name Last Name	
Additional homogymor phone number	
Additional homeowner phone number	
Must be an Australian phone number.	
Please list the preferred contact number either Mol	pile or Landline
Additional homeowner email	
Must be an email address. Please use the email address you would like to rece	eive correspondence from NSW RA
Are there more than two homeowners fo	r this property? *
○ Yes	○ No
If yes, details of the other homeowner/s will be req	uested later.
Preferred Contact	
Please advise the main contact for this applica	ation.
Who will be the main contact the NSW RA	A should contact about this application? *
Primary HomeownerAdditional Homeowner	ExecutorPower of Attorney
Nominated Contact	Legal Representation

Nominated Contact Information

Please provide information about the Nominated Contact who will be the main contact for this application.

Nominated contact First Name	name * Last Name
i iist Name	Last Name
Relationship to hom	neowner *
Nominated contact	primary phone number *
Must be an Australian ph Please list the preferred	contact number either Mobile or Landline
Nominated contact	primary email *
Must be an email addres	s. Iress you would like to receive correspondence from NSW RA
contact * Attach a file:	ed documentation that gives authority to the nominated
Please ensure the docum	nent includes your signature, and upload the file as PDF.
Executor Informa	tion
Please provide informa application.	ation about the Executor who will be the main contact for this
Executor name *	
First Name	Last Name
Executor primary ph	none number *
Must be an Australian ph Please list the preferred	one number. contact number either Mobile or Landline
Executor primary er	nail *
- Primary Ci	
Must be an email addres Please use the email add	s. Iress you would like to receive correspondence from NSW RA

Please upload signe authority * Attach a file:	d documentation the	at provides evidence	of the executor
Please ensure the docum	ent includes your signatu	ure, and upload the file as	PDF.
Power of Attorney	/ Information		
Please provide informathis application.	ation about the Power	of Attorney who will b	e the main contact for
Power of Attorney n	ame * Last Name		
Power of Attorney p	rimary phone numb	er *	
Must be an Australian ab			
Must be an Australian ph Please list the preferred		obile or Landline	
Power of Attorney p	rimary email *		
Must be an email address Please use the email add		ceive correspondence fron	n NSW RA
Please upload signe Attorney for the hor Attach a file:		at gives authority to	the Power of
Please ensure the docum	ent includes your signatu	ure, and upload the file as	PDF.
Legal Representa	tion Information		
Please provide information for this application.	ation about the Legal I	Representative who w	vill be the main contact
Legal representative	e name * Last Name		
Legal representative	e primary phone nur	mber *	
Must be an Australian ph	one number.		
Legal representative	e primary email *		
Must be an email address			

Please upload signed docu for the homeowner * Attach a file:	mentation tha	at gives authori	ity to legal representation
Please ensure the document inclu	ıdes your signatu	re, and upload the	file as PDF.
Additional Applicant Inf	ormation		
Individual and exceptional circ Program. Your responses to th situation.			
Please note that supporting do Individual and Exceptional Circ			
This section is optional to o	complete.		
What is the date of birth of	f the oldest he	omeowner?	
Must be a date.			
Does the homeowner have physical or cognitive ability		r medical condi	ition that affects their
○ Yes	○ No	(○ N/A
Is the homeowner caring for affects their physical or co		?	
○ Yes	○ No	(○ N/A
Does the homeowner have ○ Yes	a Health Care ○ No	=	y Services Australia? ○ N/A
Has the homeowner been o ○ Yes	diagnosed wit		ntal health condition? ○ N/A
Is the homeowner suffering	g from serious	financial hards	ship?
○ Yes	○ No	(○ N/A
Have any adjustments beeintellectual disabilities pric			ne home due to physical or
○ Yes	○ No	(○ N/A
Is there any other informat homeowners circumstance			
Upload supporting docume Attach a file:	entation relati	ng to circumsta	ances indicated above

Form Preview

Files can be uploaded in PDF, JPG or PNG formats.

Submission of Application

* indicates a required field

By submitting this form I hereby declare that:

I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;

All information provided, including the responses to each question in the relevant sections of this form, is true and correct to the best of my knowledge;

Any information contained in this form may be disclosed to other government agencies, NSW RA staff, and other relevant external stakeholders (including consultants, lawyers and other advisers) as part of the assessment for the Resilient Homes Program;

I am authorised to submit this form on behalf of, and have the authority to represent and bind, the eligible homeowner;

- I understand that any false declaration may render this form ineligible/invalid; and
- I understand that in order for the NSW Reconstruction Authority to assess my eligibility for the Resilient Homes Program the homeowner may also be required to supply further documents or confirm information.

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Attach a file:	