

Administrative access amendment form

This form should be completed by a tenant or applicant if they have viewed their file under Administrative Access and wish to add his/her own statement to that file. Specifically, this form should be used in cases where a tenant believes information on the file is misleading, incomplete, inaccurate or untrue.

Please note that in no circumstances can original documents be amended or removed.

Applicant / Te	nant De	tails										
Full Name:												
Date of Birth:			/	/			cation/ [·] ence N	Tenancy umber				
Address:												
									Postco	de		
Phone Number	s:	Home			M	obile			Contact			
Email												
Issue or docum	ents tha	ıt ame	ndmer	nt relates	s to							
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Privacy Notice The Department of Hohousing needs and se governmental agencie personal information vobligations is available	rvices, your s that now, vill not be di	personal or will, isclosed	information provide yet to any other	on may be d ou with hou her third pa	lisclosed using ar rty with	d to partner aલ nd/or support	gencies, services	service provi	iders, local thorised or	governme required	ents a by la	and non- aw, your
Signature				-				Da	te:	/		/

Extra space is provided on second page. Please ensure you sign and date both pages.

Department of Housing www.housing.qld.gov.au

Administrative access amendment form (cont'd)

Full Name:			
oplication/ Tenancy ference Number	[Date of Birth	/ /
ddress:		_	
			Postcode
Name	Signature		Date

Please return completed form to your nearest Housing Service Centre.