

## Application to conduct a business from a departmental property

This form must be completed by the legal tenant/s and (if different) the household member conducting a business from a Department of Housing property.

Tenant/s name/s						
Address of property						
				Postcode		_
Home phone:		Mobile:				
Tenancy Reference No.:		Email:				
How would you prefer to	be contacted? (P	 hone, letter	, SMS, email etc). You	ı may list mo	re thar	one
Details of business:						
Business name (if applica	able):					
Type of business:						
Is anybody employed in the If yes, will they live in the h		ot normally a	household member?		′es 🗌	No 🗌
Note: if ves. please complete the N	New Household Member fo	rm (PH138) avai	lable from your nearest Housing	Services Centre.		

Note: If yes, please complete the New Household Member form (PH 138) available from your nearest Housing S

## Conditions for the approval to conduct a business:

- The tenant/s and other household members must continue to live in the property on a full time basis.
- 2. The business would not adversely affect the neighbourhood and the property.
- 3. The business complies with all relevant government regulations and Local Government laws.
- 4. The property is not used for illegal purposes.
- 5. The business itself is not illegal.
- 6. The tenant/s will provide details of income received from the business for each rent review.
- 7. The tenant/s will take out all relevant insurances (e.g. Workers Compensation, Public Liability etc) and provide copies to the department. The tenants are responsible for maintaining insurance at all times and for informing the department when the business type or insurance has changed or lapsed.
- 8. There are no more than two employees and the employer working at the premises at any one time. Special circumstances will be considered on a case by case basis.

**Note:** You have 28 days from submitting this form to provide a copy of the relevant insurance taken out for the business and, if applicable, evidence that your business complies with relevant government regulations and local government laws. If evidence is not provided within 28 days, approval to conduct the business will not be provided.

**Privacy Notice** The Department of Housing is collecting your personal information so we may provide you with housing assistance. To assist you with your housing needs and services, your personal information may be disclosed to partner agencies, service providers, local governments and non-governmental agencies that now, or will, provide you with housing and/or support services. Unless authorised or required by law, your personal information will not be disclosed to any other third party without your consent. More information about the Department's privacy obligations is available on our website at <a href="https://www.housing.qld.gov.au">www.housing.qld.gov.au</a>.

## **Declaration:**

- To the best of my/our knowledge, the information provided on and in conjunction with this form is true and
  correct. I/We understand that it is an offence liable to a penalty under the Housing Act 2003 and a breach of
  my State Tenancy Agreement to knowingly provide false or misleading information to the Department of
  Housing.
- I/we understand the above conditions and agree to abide by them.
- I/we understand that if approval is given by the department, it is on the understanding the above conditions
  are always complied with.

Tenant		Tenan	t		H	lousehold men	nber		
Name		Nam	e			Name			
Signature		Signatur	е			Signature			
Date	/ /	Dat	е	/	/	Date	/	/	

Please return completed form to your nearest Housing Service Centre.