



# Statement of Assets and Personal Circumstances

Of the person who is to be wait listed for residential care

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Please use **block letters** and, where indicated, place a **tick** in the appropriate box. If you require any assistance in completing the forms, please contact the Resident Financial Services Department at TLC Aged Care on (03) 9458 7777. On completion, keep a photocopy and forward the original form to TLC Aged Care, P O Box 144, Heidelberg, Victoria, 3084.  
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You may choose not to give information about your assets.  
In this case, the maximum Accommodation Bond or Accommodation Charge would be charged.  
If you wish to take this option,  
please complete the "Option Not to Provide" form and the Statutory Declaration.

**Please Note: All applicants MUST complete and return the Statutory Declaration.**

**Name of Facility:** \_\_\_\_\_

**Person to be wait listed:** Please tick  High Care  Low Care

Family name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Current address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Marital Status:  Married  Widowed  DeFacto  Divorced  Single  Separated

**Person completing this form:**

If this is the person to be wait listed, please write: "as above"

Family name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Email address (if applicable): \_\_\_\_\_

Telephone (work): \_\_\_\_\_ Telephone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

**Financial correspondence relating to this application to be sent to:**

If this is the same person who is completing the application, please write: "as above"

Family name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Email address (if applicable): \_\_\_\_\_

Telephone (work): \_\_\_\_\_ Telephone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

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## Financial details of the person who is to be wait listed for a high or low care facility

1. The information to be provided in the following pages will be used by the aged care residential facility to determine the financial status of the person who is to be wait listed, with particular reference to the assessment of:
    - 1.1 Whether the Resident is a concessional or assisted Resident according to Commonwealth guidelines.
    - 1.2 The amount of accommodation bond / accommodation charge to be paid by the Resident.
  2. Married / de facto applicants should answer all questions by including all assets owned by both partners. The aged care residential facility will then halve the couple's total assets to determine the applicant's assets. Assets include the net value of a person's property, including property outside Australia. If the person is a member of a couple, the value of the person's assets is half the value of the couple's combined assets. When a person owns an asset jointly with someone other than their spouse, only their share of the net asset is taken into account. In some cases the resident's home is exempt from the assets' test (see next page under Property Assets).

**Note:** In the case of **applications for couples** separate Statement of Assets and Personal Circumstances and Statutory Declarations must be completed for each partner.
  3. All information provided will be kept confidential by the aged care residential facility. Unless ordered by a court, the facility will not disclose the information provided in this form to any other body to use for any other purpose.
  4. Please read and complete the document in full. It is important that the information is both accurate and complete. If there is insufficient space in any section, please provide additional information on an attached sheet.
  5. Note that the completed Statutory Declaration must be witnessed by a Justice of the Peace or other lawfully qualified person. The provisions of an Act of the Parliament of Victoria render persons making a false declaration punishable for wilful and corrupt perjury.
  6. The aged care residential facility reserves the right to require the applicant to provide evidence to support any matters contained in their Declaration.
  7. On completion of the Statement of Assets and Personal Circumstances and Statutory Declaration, please place in a sealed envelope and post or hand deliver to:

TLC Aged Care  
P O Box 144  
Heidelberg Victoria 3084  
Please keep a photocopy.
- PLEASE NOTE:**  
Where the Care Recipient (CR) has been admitted to the Facility after 1 October 2002 as a Concessional Resident and is subsequently found not to meet the criteria required to be met by a Concessional Resident then, provided the assets of the CR at the time of entry exceeded the Minimum Amount, the CR must pay to the Approved Provider the Accommodation Bond referred to in Item 1 of Schedule 2 calculated from the date of entry.

◆ Married / defacto applicants should answer all questions by including all assets owned by both partners.

## Pension

1. Do you receive a pension?  Yes  No

If **yes**, please attach a photocopy of **current Pensioner Concession Card** and complete the following details:

	<b>Present Fortnightly Amount Received</b>	<b>Pension Number</b>
Age Pension	\$	
Blind Pension	\$	
Service Pension	\$	
Disability Pension	\$	
War Widow's Pension	\$	
Overseas Pension	\$	

Are you an Australian ex-prisoner of war?  Yes  No

## Financial Assets

2. If you have money and / or investments, please indicate balances at the date of this declaration. (Note: If you are part of a couple please include total assets)

<b>Bank Account and Other Investments</b>	<b>Total Amounts</b>
Rollover Funds	\$
Savings Bank Accounts	\$
Cheque Accounts	\$
Fixed or Term Deposits	\$
Shares	\$
Debenture Stock	\$
Friendly Society / Building Society / Credit Unions	\$
Government or Semi-Government Bonds	\$
Property Trusts	\$
Managed Trusts	\$
Loans	\$
Family Loans	\$
Coin / Art / Antique Assets / Stamp Collections, etc.	\$
Other investments – please detail on an attached sheet	\$
Other Assets of Value not shown above including any assets or funds disposed of during the last five years	\$

♦ Married / defacto applicants should answer all questions by including all assets owned by both partners.

**Property Assets**

3. The value of a person's home will be excluded as an asset if, when the person enters care:

- ▶ the person's **spouse** or **dependent child** is living in it;
- ▶ a **carer** who is eligible for a pension or other income support payment has lived there for **two years**, or
- ▶ a **close relative** who is eligible for a pension or other income support payments has been living there for at least **five years**.

The following information is required to enable aged care residential facilities to determine whether the potential resident will be requested to pay an accommodation bond or charge.

a) Do you own or part own the house, unit or flat in which you normally live?  Yes  No  
 If **yes**, please provide the following information regarding the property:

Address: \_\_\_\_\_

Share of the property owned by you (e.g. 100%, 50%): \_\_\_\_\_%

Current market value of property: \$ \_\_\_\_\_

b) Do you have a spouse or dependent child living in your home?  Yes  No  
 If **yes**, please indicate:  Spouse  Dependent Child

c) Have you had a carer who is eligible for a pension or other support payment living in your home for at least the past two years?  Yes  No  
 Name of Carer: \_\_\_\_\_

d) Have you had a close relative who is eligible for a pension or other income support payment living in your home for at least five years?  Yes  No

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4. Have you disposed of any property in which you were living in the past two years?  Yes  No

If **yes**, please state: ▶ amount received Amount \$ \_\_\_\_\_

and, ▶ location / suburb of property: \_\_\_\_\_

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5. Do you own, or part own any other residential or commercial property?  Yes  No

If **yes**, please state details for each additional property:

▶ location / suburb of property: \_\_\_\_\_

▶ share if property owned by you (e.g. 100%, 50%) \_\_\_\_\_%

▶ Current market value of property: \$ \_\_\_\_\_

▶ Is the property mortgaged? (If yes, please see Question 5)  Yes  No



◆ Married / defacto applicants should answer all questions by including all assets owned by both partners.

6. Have you any loans to repay?  Yes  No

If yes, please state amount and give details: Amount \$ \_\_\_\_\_

Details: \_\_\_\_\_

Other Assets

7. Are you eligible to pay or have you paid an accommodation bond / accommodation charge to another facility:  Yes  No

If yes, please provide details: Date of entry to that facility: \_\_\_\_\_

Name of facility: \_\_\_\_\_

Amount of Bond: \$ \_\_\_\_\_ Retention amount per year: \_\_\_\_\_

Amount of Accommodation Charge: \$ \_\_\_\_\_ per day

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8. Do you own a car, boat or caravan?  Yes  No

If yes, please state total value: \$ \_\_\_\_\_

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9. What is the estimated value of your other personal possessions, including household items (do not use insurance replacement value)? \$ \_\_\_\_\_

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10. Do you have a life insurance policy?  Yes  No

If yes, please state surrender value: \$ \_\_\_\_\_

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11. Do you have superannuation from which lump sum amounts can be withdrawn?  Yes  No

If yes, please state amount of lump sum allowed: \$ \_\_\_\_\_

Office use only
[Empty box with horizontal lines for office use]



# Option Not to Provide Statement of Assets & Personal Circumstances

I, \_\_\_\_\_, do not wish to provide details of my Assets and Personal Circumstances to determine my liability to contribute to an Accommodation Bond (Low Care entry or High Care Extra Service entry) or Accommodation Charge (High Care entry) at \_\_\_\_\_ (name of residential aged care home).

I have sufficient income and assets in excess of 2.5 times the single-rate base pension to enable me to pay:

(a) An Accommodation Bond of \$

**OR**

(b) A periodic monthly payment on Bond of \$  paid as retention and interest, at the prevailing Retention and Accommodation Bond Interest Rate

**OR**

(c) A combination of the above:	Lump Sum of	\$
	Periodic Payment on	\$
	<b>Total Bond -</b>	\$

**OR**

(d) An Accommodation Charge of \$

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Should you choose this option, please complete this form together with the Statutory Declaration, then forward to TLC Aged Care, P O Box 144, Heidelberg, Victoria, 3084.



# Statutory Declaration

## Applicant (i.e. person to be wait listed)

Family name: \_\_\_\_\_

Given names: \_\_\_\_\_

I, (name) \_\_\_\_\_

Of (address) \_\_\_\_\_

Postcode: \_\_\_\_\_

In the State of Victoria, \_\_\_\_\_

(occupation) \_\_\_\_\_

sincerely declare that the answers to all the questions in regard to the financial details of myself, or on behalf of the applicant, that the information therein is to the best of my belief true and correct in every particular and is in no way false, inaccurate, incomplete, misleading or deceptive. I agree that to allow the accurate determination of my financial status, I will provide further information or proof upon request.

**AND** I make this solemn declaration conscientiously believing that same to be true and by virtue of an ACT of the Parliament of Victoria rendering persons making a false declaration punishable for wilful and corrupt perjury.

Signature of or on behalf of applicant: \_\_\_\_\_

Declared at: \_\_\_\_\_

, in the State of Victoria

this \_\_\_\_\_

day of \_\_\_\_\_

, 20 \_\_\_\_\_

Before me: \_\_\_\_\_

(To be signed by a Justice of the Peace or such other person, as listed below, having power to take a declaration within Victoria)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

## Who can witness the Statutory Declaration?

- ▶ A pharmacist
- ▶ A legally qualified medical practitioner
- ▶ A dentist
- ▶ A member of the police force
- ▶ The sheriff or a deputy sheriff
- ▶ A councillor of a municipality
- ▶ A town clerk or shire secretary
- ▶ A veterinary surgeon
- ▶ A principal in the teaching service
- ▶ The manager of a bank
- ▶ A minister of religion authorised to celebrate marriages
- ▶ A member of the Institute of Chartered Accountants in Australia / Australian Society of Accountants / National Institute
- ▶ A member or former member of either House of the Parliament of Victoria or of the Commonwealth
- ▶ A current practitioner under the Legal Practice Act 1996
- ▶ A justice of the Peace or Bail Justice