



UTILITY/WATER AUTHORITY - FORM OF AUTHORITY

(RELEASE OF INFORMATION TO ALL UTILITY/ WATER AUTHORITIES)

Aboriginal Housing Victoria tenants are required to pay the cost of water, gas and electricity usage.

I/we declare that the information contained in this form is true and correct and hereby by authorise Aboriginal Housing Victoria, or officers acting on behalf of Aboriginal Housing Victoria, to disclose to the relevant Utility/ Water Authority information for utility/ water billing purposes in accordance with relevant Utility Companies and the Water Industry Act 1994 namely;

> At the commencement of tenancy, my name, dates of birth, identification and prior address;

> Upon termination or transfer of tenancy status by the Aboriginal Housing Victoria or officers acting on behalf of the Aboriginal Housing Victoria, my name, address, date of birth, identification and forwarding address.

* Mandatory Information – insufficient details will not be accepted

Tenant 1 Signature: _____ Date: ____/____/____

Tenant 2 Signature: _____ Date: ____/____/____

Aboriginal Housing Officers Signature: _____

Aboriginal Housing Officers Printed name: _____ Date: ____/____/____

* Property Address: _____ P/Code: _____

Tenant 1 Occupation Date: ____/____/____

* First Name: _____ * Surname: _____ Other Initial: _____

Previous Address: _____ P/ Code: _____

Mailing Address (if different from above): _____ P/ Code: _____

* Phone Work: _____ Home: _____ Mobile: _____

* Date of Birth: ____/____/____

* Tenant Identification – please provide **one** of the following

Identification Type	Identification Number	Expiry Date
Drivers Licences		
Medicare Card		
Healthcare Card		
Pension Card		
Passport Number		
Other (Please specify)		

Tenant 2

* First Name: _____ * Surname: _____ Other Initial: _____

Previous Address: _____ P/Code: _____

* Tenant Identification (if applicable)

Identification Type	Identification Number	Expiry Date
Drivers Licence		
Other (Please specify)		

(Office Use Only) Date AHV notified Water Authority: ____/____/____ Connected Y / N Initial _____



UTILITY/WATER AUTHORITY - FORM OF AUTHORITY

VACATING PROPERTY NOTIFICATION FORM

Customer Details

Water/Gas/Electricity - Account Number: _____

(Please circle)

Name on Account: _____

Property Address: _____

_____ P/Code: _____

Moving out Date: ____ / ____ / ____

Settlement Date: ____ / ____ / ____

Are all tenants vacating the property? (Please circle) Yes/No

If no, who will remain: _____

Forwarding Details

Property Address: _____

_____ P/Code: _____

Preferred contact method: Tel (home): _____ Tel (work): _____

(Please select at least one) Email: _____ Mobile: _____

Tenant's Signature: _____ Date: ____ / ____ / ____

Aboriginal Housing Officers Signature: _____

Aboriginal Housing Officers Printed name: _____ Date: ____ / ____ / ____

(Office Use Only) Date AHV notified Water Authority: ____ / ____ / ____

Rental Account updated: _____