



FIRST HOME OWNER GRANT ACT 2000

First Home Owner Grant Application Form



State Revenue Department
Western Australia

Office Use Only	
UIN	
Reference	
Officer	

Section 1 – Eligibility Criteria

Please answer the questions below by ticking (✓) the appropriate box.

Both the Applicant Eligibility Criteria and the Transaction Eligibility Criteria must be completed prior to completing other sections of the application form.

Note: All applicants **must** be considered when answering the eligibility questions.

APPLICANT ELIGIBILITY CRITERIA

1. Will this be the first time **each** applicant(s) or their spouse(s)/de facto(s) will receive a grant under the First Home Owner Grant Act 2000 in any State or Territory of Australia? Yes No
2. Is **each** applicant(s) and their spouse(s)/de facto(s) a person who has never owned a home separately or with some other person before 1 July 2000, in any State or Territory of Australia? Yes No
3. Is **each** applicant(s) and their spouse(s)/de facto(s) a person who has never owned and occupied a home, separately or with some other person on or after 1 July 2000 in any State or Territory of Australia? Yes No
4. Is **every** applicant a natural person? (i.e., not a company) Yes No
5. Is **at least one** of the applicant(s) a Permanent Resident Visa holder or Australian Citizen? Yes No
6. Will **every** applicant be occupying the home as their principal place of residence within 12 months of the date of settlement or completion of construction? Yes No

TRANSACTION ELIGIBILITY CRITERIA

7. Has each applicant **on or after 1 July 2000**, either:
 - a. entered into a Contract of Sale or Agreement for the purchase of an established home in Western Australia?
 - or
 - b. entered into a contract to have a home built in Western Australia?
 - or
 - c. in cases of an owner-builder, commenced construction of a home in Western Australia?
 Yes No
8. Will all the applicant(s) be acquiring a relevant interest in the land on which the home is or will be situated? (Refer to attached definitions for what is a relevant interest) Yes No

NOTE:

If you have answered 'YES' to all the above questions, you may be eligible for the grant. The Commissioner of State Revenue will decide whether you are eligible for the grant and you will receive written notice of the Commissioner's decision.

Section 2 - Applicant Details

It is essential that **ALL** applicants complete this section. (refer to attached definitions for who is an applicant).
Please use a second application form and complete sections 2 and 5 (and schedule 1, if necessary) where there are more than two applicants.

Number of persons who have or will have a relevant interest in the property
(refer to attached terms used for what is a relevant interest)

	Applicant 1	Applicant 2																
Title	Dr <input type="checkbox"/> Miss <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	Dr <input type="checkbox"/> Miss <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>																
First name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Middle name(s)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Family name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Please provide name on original birth certificate if different to above																		
Original first name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Original middle name(s)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Original family name (including maiden name)	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Date of Birth	<table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 10%;">D</td><td style="width: 10%;">D</td><td style="width: 10%;">M</td><td style="width: 10%;">M</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 10%;">D</td><td style="width: 10%;">D</td><td style="width: 10%;">M</td><td style="width: 10%;">M</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y											
D	D	M	M	Y	Y	Y	Y											
Place of Birth	State/Territory <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Country of Birth	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Daytime contact telephone number	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>																
Current residential address	<input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">State</td> <td style="width: 50%;">Postcode</td> </tr> </table>	State	Postcode	<input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">State</td> <td style="width: 50%;">Postcode</td> </tr> </table>	State	Postcode												
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State	Postcode																	
Address for service of notices (if different to above)	<input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">State</td> <td style="width: 50%;">Postcode</td> </tr> </table>	State	Postcode															
State	Postcode																	
(Please tick (✓) the appropriate box)																		
Do you have a spouse/de facto?	Yes <input type="checkbox"/> If Yes, please answer the next question No <input type="checkbox"/>	Yes <input type="checkbox"/> If Yes, please answer the next question No <input type="checkbox"/>																
Do you have a spouse/de facto who is 'not' an applicant?	Yes <input type="checkbox"/> If Yes, your spouse is required to complete schedule 1 (Spouse Details) No <input type="checkbox"/> If No, your spouse/de facto must complete applicant details.	Yes <input type="checkbox"/> If Yes, your spouse is required to complete schedule 1 (Spouse Details) No <input type="checkbox"/> If No, your spouse/de facto must complete applicant details.																
Please indicate in which States/Territories you have previously lived	ACT <input type="checkbox"/> NSW <input type="checkbox"/> NT <input type="checkbox"/> QLD <input type="checkbox"/> SA <input type="checkbox"/> TAS <input type="checkbox"/> VIC <input type="checkbox"/>	ACT <input type="checkbox"/> NSW <input type="checkbox"/> NT <input type="checkbox"/> QLD <input type="checkbox"/> SA <input type="checkbox"/> TAS <input type="checkbox"/> VIC <input type="checkbox"/>																

Section 3 - Details of home purchased or land on which it is situated

Address
 Lot No. _____ or Street No. _____ Street Name _____

Town/Suburb _____ State _____ Postcode _____

Date when occupation commenced or intended date of occupancy (if not known, please estimate)
 _____ / _____ / 2____ / _____ / _____ / _____
 D D M M Y Y Y Y

Contract Price \$ _____

Cost to Construct \$ _____

(Please tick (✓) the appropriate box)

Title Reference Certificate of Title

Crown Lease Volume _____ Folio _____

Other

What type of transaction does this application refer to: (please tick (✓) the appropriate box).

Established Home Date of Settlement _____ / _____ / _____
 Date of Contract _____ / _____ / _____

or

Contract to Build Expected Date of Completion _____ / _____ / _____
 Date of Contract _____ / _____ / _____

or

Owner Builder Expected Date of Completion _____ / _____ / _____
 Date of Commencement _____ / _____ / _____

Section 4 - Payment Details

If applying through the State Revenue Department of Western Australia, the grant will be paid by Electronic Funds Transfer into the account nominated below.

(If the applicant is applying through an Approved FHOG Participant please **do not** complete the account details below.)

Applicant Reference _____

Account Name _____

BSB number _____

Account number _____

Section 5 – Declaration

- I have completed and submitted the application form and all relevant documents in support of my application.
- I intend to reside in the home that is the subject of this application as my principal place of residence within 12 months of settlement or within 12 months of completion of construction.
- I undertake to notify the Commissioner of the State Revenue Department of Western Australia of any Notifiable Event relevant to the legislation requirements under the *First Home Owner Grant Act 2000* within 14 days from the occurrence of that Notifiable Event.
- I have read and understood the information prepared by the State Revenue Department of Western Australia relating to the conditions of eligibility. I accept that if the conditions are not met, I may not be entitled to receive or retain the grant.
- I authorise the Approved FHOG Participant to access any information about me in their possession and disclose it to the State Revenue Department of Western Australia for the purpose of administering the Scheme and I authorise the State Revenue Department of Western Australia to have access to that information for that purpose.
- I understand that the Approved FHOG Participant is not authorised by the State Revenue Department of Western Australia to offer any advice or assistance on the conditions of eligibility for the grant, or in the completion of the application.
- I understand that the State Revenue Department of Western Australia may give some of this information to other government agencies authorised by law to receive it.
- I authorise the State Revenue Department of Western Australia to deposit the grant into the account nominated in section 4.

Note: Penalties for making a false or misleading statement in or in connection with an application for a first home owner grant carries a maximum penalty of \$20,000 under the Western Australian First Home Owner Grant Act 2000.

Applicant 1

Applicant 2

	<hr/>	
	Name of Applicant 1	
	<hr/>	
	Signature of Applicant 1	
Date	<hr/>	2
Before me	<hr/>	
	Signature of witness (not an applicant or spouse/de facto of an applicant)	
Full name	<hr/>	
	Name of witness	
	<hr/>	
	Address of Witness	

	<hr/>	
	Name of Applicant 2	
	<hr/>	
	Signature of Applicant 2	
Date	<hr/>	2
Before me	<hr/>	
	Signature of witness (not an applicant or spouse/de facto of an applicant)	
Full name	<hr/>	
	Name of witness	
	<hr/>	
	Address of Witness	

Evidence to be submitted in support of the application

The following documentation to be sighted by the Approved FHOG Participant or the State Revenue Department of Western Australia must be submitted in support of the application.

The following documentation is required as proof of Australian Citizenship or Permanent Residency status for one of the applicants in the form of:

Australian Passport or a certified copy of the Birth Certificate or Extract of the Birth Certificate, if born in Australia; or

Type of Document _____ Name on Document _____

Please insert relevant document no. _____

Original or certified copy of an Australian Citizenship certificate, if born outside Australia; or

Name on Document _____

Please insert relevant document no. _____

Original or certified copy of a Permanent Residency Visa (Australia resident visa), if you are not an Australian citizen.

Name on Document _____

Please insert relevant document no. _____

The following documentation is required in respect of the purchase or construction of the home.

Established Home - A signed copy of the Contract for Sale and Purchase.

Contract to have a home built - A signed copy of the Contract to Build, the builder's receipt for the final payment (proof of completion) and copy of land title.

Building of a home by an owner builder - Copy of land title and evidence confirming that the home is ready for occupation.

Schedule 1 - Spouse Details

This schedule must be completed where the spouse/de facto of an applicant **has not** been specified as an applicant in section 2 of the application.

	Spouse of Applicant 1	Spouse of Applicant 2
Title	Dr <input type="checkbox"/> Miss <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	Dr <input type="checkbox"/> Miss <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>
First name	<input type="text"/>	<input type="text"/>
Middle name(s)	<input type="text"/>	<input type="text"/>
Family name	<input type="text"/>	<input type="text"/>
Please provide name on original birth certificate if different to the above		
Original first name	<input type="text"/>	<input type="text"/>
Original middle name(s)	<input type="text"/>	<input type="text"/>
Original family name (including maiden name)	<input type="text"/>	<input type="text"/>
Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>D D M M Y Y Y Y</small>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <small>D D M M Y Y Y Y</small>
Place of Birth	State/Territory <input type="text"/>	<input type="text"/>
Country of Birth	<input type="text"/>	<input type="text"/>

SPOUSE DECLARATION

I declare that the Spouse Details above and the answers provided in questions 1, 2 and 3 of the Applicant Eligibility Criteria in section 1, insofar as they relate to me, are true and correct.

- I give authorisation to the Approved FHOG Participant identified in this application to have access to any information that it holds about me that may be relevant to the eligibility of the applicant(s) for the WA First Home Owner Grant and to disclose it to the State Revenue Department of Western Australia for the purpose of administering the scheme.
- I also authorise the State Revenue Department of Western Australia to conduct checks on any information provided in this schedule.

Note: A penalty of up to \$20,000 may be imposed, under the First Home Owner Grant Act 2000, for making a false or misleading statement

	Spouse of Applicant 1	Spouse of Applicant 2
	<input type="text"/>	<input type="text"/>
	Name of spouse of Applicant 1	Name of spouse of Applicant 2
	<input type="text"/>	<input type="text"/>
	Signature of spouse of Applicant 1	Signature of spouse of Applicant 2
Date	<input type="text"/> 2	<input type="text"/> 2
Before me	<input type="text"/>	<input type="text"/>
	Signature of witness (not an applicant or spouse/de facto of an applicant)	Signature of witness (not an applicant or spouse/de facto of an applicant)
Full name	<input type="text"/>	<input type="text"/>
	Name of witness	Name of witness
	<input type="text"/>	<input type="text"/>
	Address of Witness	Address of Witness

Terms Used

Applicant(s) - A person(s) who, on completion of the purchase of an established home or construction of a new home, will be an owner.

Applicant's Spouse - The person to whom the applicant is married or with whom the applicant has been cohabiting, on a genuine domestic basis in a relationship of de facto marriage for at least 2 years at the time the application is made.

Approved FHOG Participant – the financial institution that received this application on behalf of the State Revenue Department of Western Australia.

Contract to build – a contract under which a builder agrees to build a home from the start of building work to when it is ready for occupation.

Established home - A home that is already built and ready for occupancy.

FHOG – First Home Owner Grant.

Home - Is a building, affixed to land, that-

(a) may lawfully be used as a place of residence; and

(b) is, in the Commissioner's opinion, a suitable building for use as a place of residence.

Intended Date of Occupancy - Is the date on which the applicant(s) expects to commence living in the house as their principal place of residence.

Notifiable Event - When any part of the eligibility criteria is not met, the applicant(s) must notify the Commissioner within 14 days from the occurrence of this event. For example, when the applicant(s) does not occupy the home as their principal place of residence within 12 months.

Owner builder - An owner of land who builds a home, or has a home built, on the land without entering into a Contract to Build.

Owner/Home Owner - A person who has a relevant interest in land on which a home is built.

Permanent Resident - A person who holds a permanent visa within the meaning of section 30 of the Migration Act 1958 of the Commonwealth.

Relevant Interest - A relevant interest in land refers to the means by which a person holds their interest in the land. This commonly is an estate in fee simple. Other forms of interest are defined in the Act.

Contacts

Once completed, you may submit your application and supporting evidence to an Approved FHOG Participant

Or, you may submit this application directly to the State Revenue Department

By Correspondence	In Person	For any further information contact
FIRST HOME OWNER GRANT STATE REVENUE DEPARTMENT GPO BOX T1600 PERTH WA 6845	STATE REVENUE DEPARTMENT Mt Newman House 200 St Georges Terrace PERTH WA 6000	Telephone: 1300 363 211 Internet: www.wa.gov.au/srd