

Home Repairs & Maintenance Policy

Relief of Poverty and Advancement of Social Welfare

Provides each registered beneficiary with financial assistance to assist with the costs associated with the repair, maintenance, additions or improvements of their registered principal place of residence. Including electrical, plumbing, gas maintenance, fencing, garden maintenance and skip bins. This also includes furniture removal and storage and any protective clothing required while doing these works.

BENEFICIARY INFORMATION

| | | | |
|-------------------|--|----------------|---|
| Application Date: | | Date of Birth: | |
| Full Name: | | | Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior |
| Street Address: | | | |
| City / Suburb: | | State: | Postcode: |
| Email: | | Phone: | |

Please tick if the phone number provided is a new number and you would like us to update your contact details

PROPERTY DETAILS

| | | | |
|-----------------|----------------|--------|-----------|
| Street address: | City / Suburb: | State: | Postcode: |
|-----------------|----------------|--------|-----------|

REPAIRS / MAINTENANCE DETAILS

| | | | | |
|---|---|------------------------------------|--------------------------------------|---------------------------------------|
| Details of repairs or maintenance services: \$..... | <input type="checkbox"/> Garden maintenance | <input type="checkbox"/> Skip bins | <input type="checkbox"/> Fencing | <input type="checkbox"/> Improvements |
| | <input type="checkbox"/> Electrical repairs | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Gas repairs | |
| Other costs: \$..... | Please specify: | | | |
| TOTAL \$..... | Up to \$15,000 per beneficiary per financial year (included in overall combined limit of \$15,000) | | | |

Have you already paid the bill? Yes No

If 'yes' please provide:

- Quote / invoice/ receipt detailing services and that the account has been paid; and / or
- Bank statement / remittance showing the funds were paid from your bank account.
- Approval letter from Housing Authority/Landlord if you are not the home owner.

If 'no' please provide:

- A quote or invoice from the supplier detailing the services and the amount owed; and
- Supplier contact, payment details and ABN, these details should be included on the supplier invoice.
- Approval letter from Housing Authority/Landlord if you are not the home owner.

Applications will NOT be processed until supporting documentation and supplier payment details are received.

- I am not claiming benefits from another source for this expense (e.g. another Trust, employer, insurance policy or government agency)
- I understand that my application will be processed by the Trustee (Mutual Trust) within **FIVE (5) business days once all required supporting documentation has been received.**

Beneficiary Signature: **Date:** / /

NOTE: Please keep a record of your receipts as you may be asked to account for how these funds were spent as per the Yinhawangka Charitable Trust Deed.

Please send completed forms and supporting documents to Mutual Trust by:
Fax: (08) 9230 7701 **Email:** perthadmin@mutualtrust.com.au **Mail:** Mutual Trust, PO Box 122, NEDLANDS WA 6909
 If you have any queries, please contact us on (08) 9230 7700