

Residential Care Subsidy application



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DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

If you need to be in a rest home or private hospital indefinitely, a Residential Care Subsidy may be able to pay for some of your care. It's paid directly to the rest home or hospital.

Before you send in this application your needs assessor will complete the Needs Assessment Certificate in this form. They'll confirm the level of care you need and that you're eligible to apply.

There are also some other conditions you need to meet, including:

- you need to be 65 years old or more, or
- 50-64 years and single with no dependent children.

If you want to know more, go to our website workandincome.govt.nz and search on *Residential Care Subsidy*.

Information is also in our Residential Care Subsidy Brochure or you can call us on **0800 999 727**.

90 Days: You need to apply no more than 90 days after the date you want the Residential Care Subsidy to start.

What's in this application

This application is made up of a number of forms. You might not need to fill them all in, but we'll direct you through the form to make sure you've completed everything you need to.

Privacy Statement	Page 2	Information about your privacy and how we protect the information you and others give us.
Needs Assessment Certificate	Pages 3–4	This form should be completed by the co-ordinator of your Needs Assessment Service
Financial Means Assessment	Pages 5–18	This is the main part of the application. We use the information you give us to work out if you can get Residential Care Subsidy.
Residential Care Loan form	Page 19	If you want to keep your home for a while to allow you to adjust to your new circumstances, but there are limited funds to pay for the cost of your Residential Care, we may be able to help with a Residential Care Loan.
Helper, Agent or Power of Attorney form	Page 20–21	This page lets us know if you have a representative for your dealings with us. We can only share information with an Agent or Power of Attorney.
Appointment of agent form	Page 22–24	If you don't have an Enduring Power of Attorney and want someone to act for you when dealing with us, you need to complete this form. We need to know what the person or organisation is authorised to do for you.
Declaration and Signature Page	Page 25	Where you agree to some conditions and sign your application.
Checklist	Page 26–27	Use this to check you've done everything you need to and have gathered all the documents we need, before you send your form to us.

What you need to do next

Once you've completed your form, and gathered all the documents we need, you can:

- **Send** your application and documents to us:

Post

Centralised Processing Services
Residential Subsidy Unit
Private Bag 9032
Whangarei 0148

Courier

Centralised Processing Services
Level 2, Rathbone Business Centre
49–53 James Street
Whangarei 0110

- **Take it to any of our offices.** We'll copy and send your documents to our processing unit
- **Scan and email** your documents to MSD_Rxx@xxx.xxvt.nz



How we protect your privacy



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Collecting your information

We collect your personal information, so we can provide income support, NZ Super or Veteran's Pension, Student Allowance, or Loans and connect you with employment, education and housing services. We do this under various Acts, which are all listed on our website at workandincome.govt.nz/privacy

- To help us do this, we collect information about your identity, your relevant history, and your eligibility for our services.
- We get this information directly from you, and we sometimes collect information about you from others, including other government agencies.
- You can choose not to give us your personal information, but we might not be able to help you if you don't.

Using your information

We use the information you give us to make decisions about the best way to help you.

- These decisions may be about:
 - whether you're eligible for our services
 - running our operations and ensuring our services are effective
 - the services we'll provide in the future.

Sharing your information

Sometimes, we need to share your information outside our Ministry to reach our goal of helping New Zealanders to be safe, strong, and independent.

- To do this, we may share your information with:
 - prospective employers to help you find work
 - contracted service providers that help us to help you
 - health providers if we need your medical information to assess your eligibility
 - other government agencies when we have an agreement with them
 - some other governments if you may be eligible to get or are getting an overseas pension.
- We also share personal information when the law says we have to.

Respecting you and your information

We make sure we follow the Privacy Act to do what's right when we use your information.

- We treat you and your information with respect, by acting responsibly and being ethical.
- We make sure any technology we use meets strict security standards so it keeps your information safe.

Get in touch if you have a question

You have a right to ask to see your personal information, and to ask for it to be corrected if it's wrong.

- If you have a question or a complaint, please get in touch.
- You can find full details about what we do with personal information in our privacy notice at: workandincome.govt.nz/privacy

Residential Care Subsidy needs assessment certificate



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This form should be completed by the co-ordinator of a Needs Assessment Service.

This form should stay with the main application and not be separated.

Client's details

1 What is the client's full name?

First and middle names

Surname or family name

2 What is the client's date of birth?

Day Month Year

3 Is the person aged 50–64 years, single with no dependent children?

 No Yes

Go to question 5

4 Is the person aged 65 years or more?

 No Yes

The person won't qualify for Residential Care Subsidy at this time

① INFORMATION FOR Q5:

It's important you check whether your client is eligible for publicly funded health services.

5 Is the person eligible for publicly funded health and disability services?

 No Yes

The person won't qualify for Residential Care Subsidy at this time

6 Has the person been assessed by a needs assessor as requiring long-term residential care in a hospital or rest home, indefinitely?

 No Yes

The person won't qualify for Residential Care Subsidy at this time

More questions over the page

Needs assessment information

7

Who has undertaken the assessment?

Name of assessor

Assessment team

8

What was the date of the needs assessment?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Service provider details

9

Who is the service provider?

Name of hospital or rest home

Address of hospital or rest home

10

What date did/will the person enter the rest home or hospital?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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11

What is the Territorial Local Authority?

Service co-ordinator's statement

Based on the answers to questions 3-6 above, I confirm the person meets the criteria for a Financial Means Assessment to be completed.

Service co-ordinator's agency

Agency's address

Email

Contact phone

Service co-ordinator's name (print)

Service co-ordinator's name signature


Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Residential Care Subsidy financial means assessment



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As you answer the questions, look for the Attachment icon  in the margin. When you see these, you may need to provide some documents. We also have a checklist to help you at the end of the form.

Please initial any changes that you make.

Tell us about yourself

If you get New Zealand Superannuation, Veteran's Pension, a benefit or extra financial help from Work and Income or have done in the past, write your client number here if you know it. This number can be found on your SuperGold Card or Community Services Card if you have one.

Client number

 | |

Tell us about yourself

1

What is your full name?

Mr Mrs Ms Miss Other

First and middle names

Surname or family name

2

Is the name on your birth certificate the same as above?

No **If no, tell us the name that is on your birth certificate** Yes

First and middle names

Surname or family name

HOW TO ANSWER Q3:

For example, have you had married names, English names, changes by deed poll, or aliases?

3

Have you ever been known by any other name?

No Yes **If yes, write them all out below**

1.

2.

4

What name would you like us to call you?

The name I wrote in Question 1 The name I wrote in Question 2

Other **If other, write the full name**

5

What date were you born?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

6

Are you:

Male
 Female
 Gender diverse

Tell us your ethnicity

7

Tick the group(s) you most identify with.

Māori → **Which tribe(s) or iwi?**

New Zealand European
 Niuean
 Samoan
 Indian

Other European
 Tokelauan
 Tongan
 Chinese

Cook Island Māori
 Other ↓ **If other, write below**
 Don't want to answer

INFORMATION FOR Q7:

We collect this information for statistics we use in research and future development work.

Tell us your contact details

8

What was your address before you entered residential care?

Flat/House number Street name

Suburb

Town/City

HOW TO ANSWER Q8:

If you lived in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

HOW TO ANSWER Q9:

Mailing address can include a PO Box, rural delivery details, or C/O address.

9

What address would you like your mail sent to?

10

What is the name and address of the rest home or hospital where you currently stay?

Rest home or hospital name

Address of rest home or hospital

11

What date did you enter the rest home or hospital?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Payment details

If you qualify for a Residential Care Subsidy, most of your NZ Super, Veteran's Pension or benefit payments must go towards the cost of your care at the rest home or hospital.

You keep a personal allowance of a set amount each payday.

12

Do you want us to redirect the contribution from your NZ Super, Veteran's Pension or benefit directly to your rest home or hospital?

No

You'll be responsible to pay this yourself

Yes

Payments will start when we've decided you're financially eligible for Residential Care Subsidy

13

Have you already paid rest home fees?

No

Yes

↓ If yes, what date have you paid your fees up to?

Day Month Year

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Tell us about your dependent children

14

Do you have dependent children in your care?

No

Go to page 8

Yes

↓ If yes, please provide details below

Child 1

Full name

Date of birth

Day Month Year

--	--	--

Relationship to you

Parent 1: Full name

Parent 2: Full name

Child 2

Full name

Date of birth

Day Month Year

--	--	--

Relationship to you

Parent 1: Full name

Parent 2: Full name

If you need to include more than two children, please write these details about each one on a separate sheet of paper, and provide it with this application form.

② HOW TO ANSWER Q14:

Please give the names of children you're responsible for, are maintained as a member of your family and you support financially.

Relationship status

① INFORMATION NOTE:

This definition applies to your situation now and immediately before you moved to the rest home or hospital.

Whether people are single or a couple affects eligibility for certain income assistance and the rate at which we can pay that assistance.

When we work out your entitlement to income assistance, we'll consider you to be in a relationship if you're married, in a civil union, or in a de facto relationship, and have a degree of companionship.

By degree of companionship, we mean two people:

- are committed to each other emotionally for the foreseeable future, *and*
- are financially interdependent.

To give you a better idea of what we mean by this, think about whether your relationship includes some of the things below:

- you live together at the same address most of the time
- you share responsibilities, for example bringing up children (if any)
- you socialise and holiday together
- you share money, bank accounts or credit cards
- you share household bills
- you have a sexual relationship
- people think of you as a couple
- you give each other emotional support and companionship.

② HOW TO ANSWER Q15:

Tick this statement to confirm you understand the definition of a relationship for benefit purposes.

15

Do you understand our definition of a relationship for benefit purposes?

No

Please talk with us

Yes

16

Do you have a partner?

No

Go to question 27 on page 10

Yes

Go to question 17

17

What is your partner's full name?

First and middle names

Surname or family name

18

What is your partner's date of birth?

Day Month Year

19

What is your relationship status with your partner?

↓ Tick one of the following boxes

Married

In a civil union

In a relationship

20

How can we contact your partner?

Tick the best way for us to contact your partner

Home phone	()	
Mobile phone	()	
Email		
Other		

Your partner's living situation

21

Where does your partner live?

Flat/House number Street name

Suburb Town/City

① INFORMATION FOR Q22:

We need to know the information in this section so we can pay them the right rate.

22

What is your partner's accommodation?

- House or flat A room in a boarding house
- Self-contained 'granny' flat Hotel or motel
- Self-contained unit in a retirement village or rest home
- Mobile home – self-contained
- A boat moored within New Zealand territorial waters
- Accommodation in a caravan park
- Other

① INFORMATION FOR Q22:

'Self-contained' for a granny flat or unit means there is a kitchen or a kitchenette and a bathroom.

'Self-contained' for a mobile home means it needs to have facilities for:

- day-to-day living
- sleeping
- preparing and cooking food.

It must also have a:

- sink
- toilet
- fresh water tank
- waste water tank.

23

Does your partner live alone?

- No
- Yes

Day Month Year

② HOW TO ANSWER Q24:

We don't need to know the name of each person.

24

Please provide details for anyone living with your partner

Person 1

Relationship to your partner

Is this person 18 years or younger?

- No
- Yes

Day Month Year

Does this person attend school or a tertiary institution? No Yes

Person 2

Relationship to your partner

Is this person 18 years or younger?

- No
- Yes

Day Month Year

Does this person attend school or a tertiary institution? No Yes

① INFORMATION FOR Q24:

If you need to include more people, please write these details about each one on a separate sheet of paper, and provide it with this application form.

② HOW TO ANSWER Q25:

A visitor is someone who doesn't normally live with your partner.

25

Does your partner have visitors aged 18 or older who'll be staying with them for 13 weeks or longer?

- No Yes

Choosing an asset threshold

Information about choosing an asset threshold

If you're 65 years or over and have a partner (who is not in care) or dependent child, the value of your assets must be equal to or below a certain threshold.

If you and/or your partner own a house and your partner and/or a dependent child are still living there, it won't be counted as an asset.

There are two asset thresholds. You can choose which one best suits your circumstances.

Threshold A is the higher threshold and **includes** the value of your house and car.

Threshold B is a lower threshold and **does not include** the value of your house and car.

To find out the amount of each asset threshold go to our website www.workandincome.govt.nz and search on the key words *Residential Care Subsidy*.

26

Which asset threshold would you like to be assessed under?

↓ Please tick one of the boxes below

- Threshold A
- Threshold B

Home ownership details

INFORMATION FOR Q27:

A Licence to Occupy or Occupation Right Agreement outlines the conditions for occupying a residential unit within a retirement village.

ATTACHMENT FOR Q27:

You'll need to provide proof of the current surrender value. You can get this from your Village Manager.

INFORMATION FOR Q28:

Owning your own home includes:

- apartment
- studio unit
- cottage.

This section is about the home you and your partner lived in (your principal place of residence) before you moved to the rest home or hospital.

27

Do you or your partner have a 'Licence to Occupy' or 'Occupation Right Agreement'?

No [Go to question 28](#)

Yes ↓ If yes, what is the current surrender value?

\$

[Go to question 37](#)

28

Do you or your partner own your own home?

No [Go to question 36](#)

Yes ↓ If yes, what is the address of the property?

Flat/House number

Street name

Suburb

Town/City

ATTACHMENT FOR Q29: **29**
Please provide your latest QV Valuation or rates demand that shows the capital value.

What is the capital value of the property?

\$

ATTACHMENT FOR Q30: **30**
Please provide proof of the mortgage and the amount still owing on it.

Do you have a mortgage on your home?

No Yes

↓ If yes, what amount is still owing on your home?

\$

31 Who'll be living in your home while you're in the rest home or hospital?

The home will be empty My partner
 The home will be rented out My dependent child
 Someone will be living there but they won't be paying rent

↓ Please explain why they won't be paying rent

32 Is your home currently rented out?

No
 Yes

33 How much rent do you charge for your home each week.

\$

ATTACHMENT FOR Q34: **34**
You'll need to provide proof of your home ownership costs.

What are your home ownership costs?

	Who do you pay?	How much do you pay?	How often do you make the payment (such as weekly, monthly or yearly)?
Mortgage 1		\$	
Mortgage 2		\$	
House insurance		\$	
Mortgage insurance		\$	
Rates		\$	
Ground lease		\$	
Water rates		\$	
Body corporate fees		\$	
Property management fees		\$	

ATTACHMENT FOR Q35:
Please provide receipts for any repair and maintenance costs.

35

Did you have to pay for repairs or maintenance to your home in the past 12 months?

No Yes

→ Please write the total amount

\$

Go to question 38

ATTACHMENT FOR Q36:
Please provide a copy of the Will if the home is owned or part owned by an estate you have involvement with, for example as a beneficiary or executor.

36

Who owns the home you were living in?

A landlord

Other family members

A trust

An Estate (Please see the attachment note)

A retirement village

Other ↓ If other, please tell us who owns the property

37

Have you ever owned a home?

No Yes

↓ If yes, when was the home sold?

Day Month Year

Tell us about your assets

HOW TO ANSWER Q38:
This includes all overseas accounts and assets.

ATTACHMENT FOR Q38:
You need to provide proof of **all** your **and** your partner's assets and their value.

38

Do you or your partner have any of the following cash assets?

Money in the bank or other savings No Yes

Term deposits, investments or shares No Yes

Bonds No Yes

Life insurance policies with a surrender or cash value No Yes

Loans made to other people (including family trusts) No Yes

Life interest in a property, family trust or estate No Yes

Other cash assets No Yes



Important: You **MUST** answer question 39 if you ticked any of the 'Yes' boxes in question 38.

ATTACHMENT FOR Q39:
You need to include proof of:

- **all bank accounts** and their full balances, including accounts and other assets held overseas
- the current interest rate % payable on all your assets.

39

If you answered 'yes' to any of the assets listed in Question 38, please write the details below.

Type of asset	You	Your partner	Jointly owned	Interest rate
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%

ATTACHMENT FOR Q40:

You'll need to provide a copy of your pre-paid funeral certificate.

40

Do you or your partner have a pre-paid funeral trust fund or account?

No

Go to question 41

Yes

↓ If yes, please write the details below

You

Who is it with?

When did you open it?

Day Month Year

How much was it for when you opened it?

\$

How much is it worth now?

\$

Your partner

Who is it with?

When did you open it?

Day Month Year

How much was it for when you opened it?

\$

How much is it worth now?

\$

HOW TO ANSWER Q41:

Examples of property include, land, holiday homes, bach/crib, investment properties and overseas property.

41

Do you or your partner have any of the following non-cash assets?

Property (other than your family home)

No

Yes

Motorhome, caravan or boat

No

Yes

Motor vehicle

No

Yes

Other

No

Yes



Important: You **MUST** answer question 42 if you ticked any of the 'Yes' boxes in question 41.

ATTACHMENT FOR Q42:

You need to provide proof of these assets including the insured value of any motor vehicles.

42

If you answered 'yes' to any of the non-cash assets listed above, please write the details below.

Type of asset	How much is it worth?	How much do you owe on it?
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Tell us about assets you've sold

43

Have you or your partner sold any assets in the last five years?

No

Yes

↓ If yes, please provide details below

Asset 1

What was the asset?

How much was it sold for?

\$

Who was it sold to?

When was it sold?

Day Month Year

Asset 2

What was the asset?

How much was it sold for?

\$

Who was it sold to?

When was it sold?

Day Month Year

HOW TO ANSWER Q43:

Please include assets sold to a trust, family members, business or charitable organisations.

INFORMATION FOR Q43:

Depending on your circumstances we may ask you for information on assets sold more than five years ago.

ATTACHMENT FOR Q43:

You'll need to provide proof of the sale of the asset, like a solicitor's settlement statement.

Tell us about assets you or your partner have gifted

INFORMATION FOR Q44:

Depending on your circumstances, we may ask you for information on assets gifted more than five years ago.

HOW TO ANSWER Q44:

Please include assets gifted to a trust, family members, business or charitable organisations.

ATTACHMENT FOR Q44:

Please provide proof of the assets you gifted. If you can't do this you'll need to talk with us.

ATTACHMENT FOR Q44:

If you have given away more assets, please write these details about each one on a separate sheet of paper.

INFORMATION FOR Q45:

A high level of care is the care provided to you that enables you to remain in the community without receiving home-based disability services. For more information go to workandincome.govt.nz and search *Recognition of Care*.

Giftng assets includes giving away, transferring, or disposing of your assets to another person or organisation.

If you or your partner (even if they have died) have given assets away they may still be counted for this assessment.

You can gift up to a certain amount for each year before you apply. To find out the amount you can gift go to our website workandincome.govt.nz and search *Residential Care Subsidy*.

44

Have you or your partner ever gifted any assets?

 No

 Yes

↓ If yes, please provide details below

Asset 1

What was the asset?

What was the asset worth?

Who was it gifted to?

When was it gifted?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Asset 2

What was the asset?

What was the asset worth?

Who was it gifted to?

When was it gifted?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Asset 3

What was the asset?

What was the asset worth?

Who was it gifted to?

When was it gifted?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Asset 4

What was the asset?

What was the asset worth?

Who was it gifted to?

When was it gifted?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
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45

Have you received a high level of care from someone other than your partner or dependent child and gifted in recognition of that care?

 No

 Yes

Are you involved with a trust?

46

Are you or your partner (including any partner who has died) involved in a trust, or have you ever been involved in a trust?

The trust can be any type of trust, including a family trust.

'Involved' means one or more of the following:

- you've set up a trust, usually by making a gift of assets or property
- you've sold or gifted assets to a trust
- you make decisions about managing a trust
- you benefit from a trust; for example, by receiving income or assets from the trust or free or subsidised accommodation.

If you are a beneficiary of a trust you are entitled to ask the trust for financial support, and the Ministry of Social Development considers it reasonable for you to do so. The trust may decide to distribute assets to you, or it may decide to make regular payments. If the trust won't support you, they'll need to tell us why.

 No

Go to question 50

 Yes

↓ If yes, please write the name of the trust



Important: You **MUST** answer question 47 if you ticked 'Yes' for question 46.

INFORMATION FOR Q47:

Financial support can include getting assets, income or free or subsidised accommodation.

47

Have you or your partner received financial support from the trust in the past?

 No

Go to question 49

 Yes

Go to question 48

48

What type of financial support did you get?

Regular payments (also known as Distribution of Beneficiary Income)

How much are you paid?

Last payment date?

How often, eg weekly, fortnightly, monthly, etc

\$		
----	--	--

Lump sum (also known as Distribution of Trust Assets)

How much was paid?

When was it paid?

\$	
----	--

Free or subsidised accommodation

INFORMATION FOR Q49:

Before we decide your application you must ask the trust for support, and you will need to give us proof of their response, like a letter from the trustees.

49

Will you or your partner get financial support from the trust?

Tick and answer all that apply.

Yes, the trust will pay a lump sum of

How much?

 \$

How often, eg weekly, fortnightly, monthly, etc

Yes, the trust will pay regular payments of

 \$

 No

→ If no, please tell us why the trust won't be financially supporting you

Estate information

50

Have you or your partner ever been the beneficiary of an estate?

No

[Go to question 58](#)

Yes

51

What is the name of the estate?

52

Have you or your partner inherited money or other assets or received financial support from the estate in the past 10 years?

No

[Go to question 57](#)

Yes

53

How was the amount paid to you?

Lump sum

[Go to question 54](#)

Regular payments

[Go to question 55](#)

54

Please tell us about the lump sum payment.

How much was it?

Day Month Year

What date was it paid?

[Go to question 57](#)

55

Have the regular payments stopped?

No

[Go to question 57](#)

Yes

→ If yes, how much did you usually get paid?

→ How often, eg weekly, fortnightly, monthly, etc

→ When was the last payment?

Day Month Year

56

Why have the payments stopped?



Important: Before you answer question 57, you **MUST** read the information for Q57 in the margin.

INFORMATION FOR Q52:

Financial support can include getting assets, income or free or subsidised accommodation.

ATTACHMENT FOR Q52:

You'll need to provide proof of your inheritance if it was recent and more than a modest amount. For example, a copy of the **Will and the latest estate accounts** if you get regular or ongoing payments.

ATTACHMENT FOR Q55:

You'll need to provide proof of your payments.

INFORMATION FOR Q57: Before we decide your application **you must ask the estate for support**. You'll need to give us proof of their response, like a letter from the executor and a copy of the latest estate accounts.

57

Will you or your partner get financial support from the estate?

Tick and answer all that apply.

<input type="checkbox"/>	Yes, the estate will pay a lump sum of	How much? \$	How often, eg weekly, fortnightly, monthly, etc
<input type="checkbox"/>	Yes, the estate will pay regular payments of	\$	
<input type="checkbox"/>	No	→ If no, please tell us why the estate won't be financially supporting you	
<input type="text"/>			
<input type="text"/>			
<input type="text"/>			

Outstanding debts

58

ATTACHMENT FOR Q58: You'll need to provide proof of those debts if they are more than \$500.

What outstanding debts do you have?

Type of debt	Money owing
<input type="text"/>	\$
<input type="text"/>	\$
<input type="text"/>	\$
<input type="text"/>	\$

Tell us if you're involved in a business

A business you're involved in can be:

- A sole trader
- A partnership
- A company.

ATTACHMENT FOR Q59: You must provide the latest complete set of business accounts for each business.

59

Have you or your partner had any assets or financial involvement in any business in the past 10 years?

No **Go to question 63**

Yes

INFORMATION FOR Q59: If you're involved in more than one business please provide all this information for the other business on a separate sheet of paper.

60

What is the name of the business?

61

How are/were you involved in the business? Please tick all that apply

Director Shareholder Employee

Other **↓ If other, please describe below**

62

Are you still involved in the business?

No **↓ What date did your involvement end?**

Yes

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Tell us about your income

Tell us about income in the last 52 weeks?

63

Did you or your partner get income from any of the following sources in the last 52 weeks?

- Interest from savings, investments, or bonds No Yes
- Dividends from shares, unit trusts, or managed funds No Yes
- Overseas pension, benefit or allowance payments No Yes
- Other superannuation or retirement scheme income (government or private) No Yes
- Income from rents No Yes
- Child Support payments (private arrangement or through Inland Revenue) No Yes
- Wages or salary No Yes
- Farm or business income No Yes
- Payments from self employment or contract work No Yes
- Accident compensation (eg ACC) No Yes
- Income from relatives No Yes
- Payments from a former partner No Yes
- Income insurance (replacement/protection) No Yes
- Income from Māori Land No Yes
- Other No Yes

HOW TO ANSWER Q63:
Don't include payments from Work and Income like, NZ Super or benefits.



Important: You **MUST** answer question 64 if you ticked any of the 'Yes' boxes in question 63.

ATTACHMENT FOR Q64:
You need to provide proof of all income.

64

Did you answer 'yes' or to any of the sources of income listed in question 63?

 No

 Yes

↓ If yes, tell us the total before-tax amounts, for the last 52 weeks

Where did the income come from?	Payment made to?		How often?
	You	Your partner	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

65

Do you or your partner expect to get the same or similar income from all these places in the next 52 weeks?

 No

↓ If no, what will be changing or different?

 Yes

Residential Care Loan application



MINISTRY OF SOCIAL
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If you need to be in a rest home or private hospital indefinitely and still have your own home, you may need time to adjust to your changed circumstances. This may include selling your home. Often this means there are limited funds to pay for your residential care fees.

We may be able to help with an interest-free Loan to pay your fees. It's a legal agreement with the Crown and is secured by placing a caveat over your home.

The Loan is usually repaid when your home is sold or you die – whichever happens first.

There's much more information on our website workandincome.govt.nz – search *Residential Care Loan*. We recommend that you read the information and call us on **0800 999 727** if you want to know more.

Do you need to apply?

1

Do you need to apply for a Residential Care Loan?

 No

Go to page 20

 Yes

You must complete pages 5 to 18 of this form

Mailing details

2

If a loan is approved, what address would you like your loan balance statements sent to?

3

Do you have a partner?

 No

Go to question 5

 Yes

4

Is the loan application for both you and your partner?

 No Yes

Legal details

5

Who will legally act for you?

Solicitor's name

Solicitor's address

Solicitor's contact details

Phone ()

Mobile phone ()

Email

6

What property will secure the loan?

Address of property

Residential Care Subsidy Helper, Agent or Power of Attorney form



MINISTRY OF SOCIAL
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We need to know if someone has helped you complete this form. We also need to know if you have, or want to have, an agent or Power of Attorney to represent you or help you deal with us in future. If so, you'll need to confirm their details for us on this form.

Protecting your privacy is important and we must have your written permission for other people to do things with us on your behalf, such as making enquiries or filling in forms for you. By answering the following questions, we'll have a clear understanding of what other people can or can't do for you if they contact us.

1 Helper, Agent or Power of Attorney's details

INFORMATION FOR Q1:

An agent is a person or organisation you've asked to act on your behalf when dealing with the Ministry of Social Development.

ATTACHMENT FOR Q1:

You must provide the Power of Attorney for Property or Court ordered Property Manager.

Do you have someone helping you complete this form?

No [Go to page 22](#)

Yes [If yes, what type of representative are they?](#)

- An agent I have already set up with the Ministry of Social Development
- Enduring Power of Attorney for Property
- Power of Attorney for Property
- Court appointed Property Manager
- Helper

2 Who is your representative?

A person [Go to question 3](#)

An organisation [Go to question 7](#)

INFORMATION FOR Q3:

We'll check our record of your representative's details is up-to-date.

We need to make sure your agent is over a certain age.

3 What are your representative's details?

First and middle names

Surname or family name

What is their relationship to you?

When were they born?

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

4 What is your representative's address?

Flat/House number Street name

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Suburb

Town/City

<input type="text"/>	<input type="text"/>
----------------------	----------------------

5

Is your representative's mailing address different from where they live?

No

Yes



If yes, tell us your representative's mailing address

HOW TO ANSWER Q6:

Please only give us contact details your representative would like us to use.

6

How else can we contact your representative?

Tick the best way for us to contact your representative

Home phone	()	
Mobile phone	()	
Other phone	()	
Email		

INFORMATION FOR Q7:

We'll check our record of your organisation's details is up-to-date.

7

What are the organisation's details?

Name of organisation	
Address of organisation	
Contact person's name	
Contact person's phone	
Email address	

Sample Only

Appointment of an agent form



MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

You can apply for another person or organisation to officially act on your behalf for specific services and functions with the Ministry of Social Development.

You can choose your agent and decide what they can or can't do. They can be a person or an organisation. However, whoever you choose must agree to act on your behalf.

You can change or stop your arrangement with your agent at any time by contacting us. You should also let your agent know that you no longer want them to act for you.

We have more information on our website about appointing an agent. Go to workandincome.govt.nz and search on *Agent*.

Tell us if you're appointing an agent

1

Do you want to appoint a person or organisation to officially act for you with the Ministry of Social Development?

- I already have one set up [Go to the Declaration and Signature on page 25](#)
- No [Go to the Declaration and Signature on page 25](#)
- Yes

2

Who do you want to appoint as your agent?

- A person [Go to question 3](#)
- An organisation [Go to question 7](#)

3

What are your agent's details?

First and middle names

Surname or family name

What is their relationship to you?

When were they born?
Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

4

What is your agent's address?

Flat/House number Street name

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Suburb

Town/City

<input type="text"/>	<input type="text"/>
----------------------	----------------------

5

Is your agent's mailing address different from where they live?

- No Yes [↓ If yes, tell us your agent's mailing address](#)

<input type="text"/>
<input type="text"/>



ATTACHMENT FOR Q3:

Please provide proof of your agent's identity. What you need is explained on page 27.

6 HOW TO ANSWER Q6:

Please only give us contact details your agent would like us to use.

6

How else can we contact your agent?

Tick the best way for us to contact your representative

Home phone	()	
Mobile phone	()	
Other phone	()	
Email		

7 INFORMATION FOR Q7:

We'll check our record of your organisation's details is up-to-date.

7

What are the organisation's details?

Name of organisation	
Contact person's name	
Address	
Phone number	()
Email	

Tell us how long you want an agent for

8

How long do you want to have this agent for?

- No end date – this person will be your agent until you tell us.
- Until Day Month Year

Tell us what you want your agent to be able to do

9

What rights and responsibilities do you want to give your agent?
(Please tick the boxes that apply)

- Access to my files to get personal information about me.
- Give information about me to the Ministry of Social Development, such as income details, housing need or changes in my circumstances.
- Change details in my personal file with the Ministry of Social Development.
- Receive all my mail from the Ministry of Social Development.
- Complete and sign forms on my behalf.
- Be allowed to deal with money I owe the Ministry of Social Development, which may include arranging repayments.
- Have authority over my affairs with the Ministry of Social Development, as granted by a current Power of Attorney.
- Speak or make enquiries on my behalf.
- Speak to social housing providers about a potential property match or offer.

9 INFORMATION FOR Q9:

You can give your agent as many or as few rights and responsibilities as you want. For example, "my agent can only speak or make enquiries about my Residential Care Subsidy".

ATTACHMENT FOR Q9:
Please provide the Power of Attorney if you have one.

Paying your benefit or pension to an agent

If you want your agent to get paid part or all of your benefit or pension payments you'll need to complete a redirection of benefit payment form.

10

Is there anything else you want your agent to do?

- No Yes

11

Is there anything you don't want your agent to do?

No

Yes

**If yes, please tell us below**

12

Did you fill in this form yourself

No

Go to question 13

Yes

Make sure your agent signs this page at the bottom, then go to the Client's Declaration on page 25**Client unable to sign this form**

13

Why are you completing this form for your client?

If the client is unable to sign this form, and the form is being completed on their behalf by a person wishing to be appointed their agent, please tick the reason for this.

I have authority over this client's affairs, as covered by the attached valid Enduring Power of Attorney or Court Order made under the Protection of Personal and Property Rights Act 1988.

This client is temporarily unable to do things for themselves, and I wish to be appointed their agent for a short period of time to enable the Ministry of Social Development to meet the client's immediate needs.

14

What is your relationship to this client?**ATTACHMENT FOR Q13:**

Attach a copy of either the Enduring Power of Attorney or Court Order.

Attach evidence from a registered medical practitioner. This needs to state the reason why the client can't act for themselves and how long it is likely to last.

HOW TO ANSWER Q14:

Please tell us what your relationship is with the client, for example, partner, friend, family member or support person.

Agent's declaration and signature**Agents must read and sign this section.****By signing this form you, or the organisation you represent:**

- agree to act as agent for the person named in this application
- understand the responsibilities the person has given
- will always act in the person's best interests
- agree to receive emails from the Ministry of Social Development about the person
- will let the Ministry of Social Development know if your address or contact details change
- can't access the person's MyMSD account (if they have one)
- have read and understand the Privacy Statement on page two of this form
- understand the person still has full responsibility for all matters with the Ministry of Social Development
- can stop being this person's agent, but must let the client and the Ministry of Social Development know.

The information I have provided is true and complete.

Agent's name (print)

Agent's signature

Day

Month

Year

**Important: Please make sure the application is signed on page 25.**

Declaration and Signature



Applicant's or agent's declaration and signature

Let us know when things change

You need to let us know about changes that might affect the amount you're paid, or your Residential Care Subsidy or Loan, like:

- changes to your income or assets
- changes to information about you, like your address, contact details or bank account number
- you go into or come out of hospital
- starting or ending a relationship, marriage or civil union
- if a partner passes away
- you travel overseas.

If we have the wrong information we could pay you or the Residential Care Subsidy or Loan at the wrong amount. If we pay you too much you might have to pay us back.

Sharing your information

We explain how we protect your privacy in our Privacy Statement on page two of this form.

If you get a Residential Care Subsidy, the Ministry of Social Development and Ministry of Health need to:

- share information necessary to pay and administer your Residential Care Subsidy or Loan
- provide information to your residential care provider about how your application is going, the outcome and the timing and amount of any payments we make.

By signing this form

I understand the things I need to do to get a Residential Care Subsidy or Loan. The information I have provided is true and complete.

Applicant's/Agent's name (print)

Applicant's/Agent's signature

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------


Partner's/Partner's Agent's name (print)

Partner's/Partner's Agent's signature

Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------



Use this page to check you've done everything you need to and have gathered all the documents we need. Attachment notes  in the margins of the form also show if you need to provide some documents.

Talk with us if you don't have any of the documents, have given them to us recently or if there might be a delay in getting them. You can call us on **0800 999 727**.

What you may need to provide

Documents you may need to give us	For you	For your partner (if you have one)
Home ownership documents		
Mortgage documents, showing:	<input type="checkbox"/>	<input type="checkbox"/>
• the amount still owing	<input type="checkbox"/>	<input type="checkbox"/>
• how much your repayments are and how often	<input type="checkbox"/>	<input type="checkbox"/>
Other accommodation costs including:	<input type="checkbox"/>	<input type="checkbox"/>
• house and mortgage insurance	<input type="checkbox"/>	<input type="checkbox"/>
• rates – showing the capital value or your QV valuation	<input type="checkbox"/>	<input type="checkbox"/>
• lease	<input type="checkbox"/>	<input type="checkbox"/>
• body corporate and property management fees	<input type="checkbox"/>	<input type="checkbox"/>
• repair and maintenance costs	<input type="checkbox"/>	<input type="checkbox"/>
Confirmation of the current surrender value of your Licence to Occupy or Occupation Right Agreement	<input type="checkbox"/>	<input type="checkbox"/>
Copy of the Will if your home is owned or part owned by an Estate	<input type="checkbox"/>	<input type="checkbox"/>
Assets		
Bank statements or printouts showing balances and transactions for the last three months, for every account you hold , including overseas accounts	<input type="checkbox"/>	<input type="checkbox"/>
Proof of all your other assets and income, including the interest rates on your accounts and investments	<input type="checkbox"/>	<input type="checkbox"/>
Pre-paid funeral account or trust fund certificate	<input type="checkbox"/>	<input type="checkbox"/>
Value of other property you own, including land, holiday homes, investment properties, motor vehicles, caravans, boats	<input type="checkbox"/>	<input type="checkbox"/>
Proof of sale for assets you've sold, gifted or transferred – including to any trust or family members	<input type="checkbox"/>	<input type="checkbox"/>
Trusts and estates		
Trust documents, if you're involved in a trust (for example, trust deed, deed of debt, deed of gift, gift statements, accounts)	<input type="checkbox"/>	<input type="checkbox"/>
Proof of any inheritance, for example a Will or the latest estate accounts if you get regular payments	<input type="checkbox"/>	<input type="checkbox"/>
Income and debts		
Proof of all types of income you get	<input type="checkbox"/>	<input type="checkbox"/>
The complete set of the most recent business accounts for any business you are, or have been involved with in the past 10 years	<input type="checkbox"/>	<input type="checkbox"/>
Proof of any debts that are more than \$500	<input type="checkbox"/>	<input type="checkbox"/>

If someone acts on your behalf

If you already have a Power of Attorney or someone who acts on your behalf, you'll need to provide your:	For you	For your Agent
Enduring Power of Attorney for Property	<input type="checkbox"/>	
Power of Attorney	<input type="checkbox"/>	
Court Order if the court has appointed a representative	<input type="checkbox"/>	

If you want to set up an agent with us	
Complete the appointment of agent form	<input type="checkbox"/>

If your agent is a person they need to provide:	
Two original documents that prove who they are, such as a driver licence, passport or birth certificate. Agents must bring their original documents to one of our offices to be scanned and given back straight away. Do not send them to us.	<input type="checkbox"/>

If your agent is an organisation, they need to provide a:	
Business card, or	<input type="checkbox"/>
Letter on official letterhead – needs to be an original	<input type="checkbox"/>

Have you done everything?

Last check	For you
Have you answered all the questions you need to?	<input type="checkbox"/>
Have you signed your application on page 25?	<input type="checkbox"/>
Please initial any changes you've made on the form	<input type="checkbox"/>
Has the Needs Assessment Certificate been completed?	<input type="checkbox"/>
Have you gathered the other documents you need to provide?	<input type="checkbox"/>

Sample Only

Sample Only