

FY 25-26 Martidja Banyjima Home Improvements, Repairs and Maintenance Form

Member Details – this section must be completed

To be eligible for this assistance, an applicant must be a registered MIB (non-IBN) beneficiary.

Members Full Name

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"/>
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Contact Phone Number

Tick (☑) if 'yes'

- ☐ This is my current number, please update my record
- ☐ This is a temporary number, please do not update my record

Email

The following are my current contact details and should be updated on my record: ☐ Tick (☑) if 'yes'

Residential Address

Suburb

State

Postcode

Postal Address (if different to residential address)

Suburb

State

Postcode

Please note:

- Funds cannot be used for the on-going general expenses of household and utilities bills, such as electricity, water, gas, telephone, internet, etc.
- Funds must not be used for mortgage repayments.
- No allocations of funds can be transferred from one beneficiary to another beneficiary.
- No allocations of funds can be rolled over into subsequent financial years.

Home improvements and expenses**Please tick (☐) which item(s) you would like assistance with:**

- | | |
|--|---|
| <input type="checkbox"/> Building/Pest inspection | <input type="checkbox"/> Plumbing and Electrical works |
| <input type="checkbox"/> Shire rates | <input type="checkbox"/> Renewable Energy (eg solar panels) |
| <input type="checkbox"/> Painting | <input type="checkbox"/> House insurance |
| <input type="checkbox"/> Sheds and Patios | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Generators | <input type="checkbox"/> Extensions |
| <input type="checkbox"/> Home maintenance/renovation | <input type="checkbox"/> Security Systems and Alarm |
| <input type="checkbox"/> Heating / Air Conditioning | <input type="checkbox"/> Other |

Available	Beneficiary allowance
Home Improvements	Up to \$5,000

Details of request: (note; no cash payments or reimbursements to beneficiaries are allowed)

Items	Supplier	Phone	Invoice / Quote No (#)	Amount
Total:				

Comments: _____

Checklist of required documentation

Please tick (☑)

- ☐ Copy of mortgage/home loan document with member listed as account holder
- ☐ Quotes/invoices for services requested (for house maintenance/shire rates, etc.)

If any supporting documentation has not been included, BNTAC will contact the member to advise. This may delay processing of the application. BNTAC will make several attempts to contact the member. If a response is not received from the member within one month, the application will lapse and become inactive. If the member wishes to proceed with the application at any time, they should contact BNTAC to reactivate the application. Updated support documents may be required at this time

Declaration

I declare that the information I have provided above is true, complete, and accurate. I authorise BNTAC to speak to any interested parties about my application. BNTAC will not provide confidential or sensitive information to interested parties without explicit consent from myself. I understand that, in accordance with the Banjima Charitable Trust Deed, no cash payments or reimbursements can be made to me or any other Banjima beneficiary.

Signature

X

Date

		/			/				
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Please send the completed form to:

Email: ms@bntac.org.au

Fax: 08 9216 9898

Post: BNTAC, PO Box 6278 WA, 6892

In person: Level 1/165, Adelaide Terrace, East Perth WA 6004

For further information please contact BNTAC on 9216 9888

Banjima Native Title Aboriginal Corporation RNTB (ICN-7971)

A: 1/165 Adelaide Terrace EAST PERTH 6004

PO Box 6278 East Perth WA 6892 P: (08) 9216 9888

W: bntac.org.au