



Application for Relocation

Toll Transitions requests you to complete this form before relocation.

Collection, storage and use or disclosure of personal information is subject to the Information Privacy Principles set out in section 14 of the Privacy Act 1988.

Toll Transitions will collect and use or disclose the information you provide to arrange any of the following services which you may require:

- removal and storage of furniture and effects,
- temporary accommodation,
- travel arrangements,
- calculation of allowances,
- relocation support for you and your family.

Toll Transitions usually gives some or all of the information (including your relocation details) to the Department of Defence and to contractors involved in relocation services. These agencies and organisations are not permitted to use or disclose your personal information, without your consent, for a purpose other than the purpose for which the information was given to them.

Your personal information may also be given to your spouse or interdependent partner or to other organisations on a need to know basis for reasons such as law enforcement or in connection with legal proceedings.

These organisations include:

- Centrelink,
- Australian Taxation Office,
- Commonwealth or State Departments/Agencies where there is an obligation to provide it,
- Department of Social Services,
- Law enforcement agencies including the police.

Please answer all relevant questions. This will enable Toll Transitions to process this application on time to meet your relocation requirement. Please call your local Toll Transitions Relocation Service Centre if you require assistance with this form. Attach/provide all requested documents to assist the approval process. A Document Checklist is provided with this pack.

Part A – Personal details – All questions must be completed

Part B – New Unit/Base and relocation details – Please complete relevant questions.

Part C – Housing considerations – Please complete relevant questions.

Part D – Other considerations – Please complete, if applicable.

Part E – Travel details – Please complete relevant questions.

Part F – Furniture and effects – Please complete relevant questions.

Part G – Temporary accommodation – Please complete, if applicable.

Part H – Declaration – To be completed by all members

Part I – Discharge Declaration – To be completed by all members discharging from the ADF.

Returning the Application for Relocation

Please return this completed form to your local Toll Transitions Relocation Service Centre. Alternatively you may complete the AFR online at www.tolltransitions.com.au/defence

Keep a photocopy of the completed form for your records.



Forms for relocation checklist

Reason	Additional forms required
Posting	Posting Order
Discharge	Discharge Authority Deferment of Removal Request
Marriage/interdependent partnership Recognition	Notice of Intent of Marriage Marriage Certificate Approval of interdependent partnership from Unit CO or respective Director General
Exchange of Service Residence	Approval from Defence Housing Australia
Recall to SR	Approval from Defence Housing Australia
Breakdown of Marriage	Member: Chapter 1 PACMAN Proforma Categorisation Spouse/Partner: Separate Declaration—both parties to contact the RSC
Eviction from R/A	Eviction notice from Real Estate agent
LIA eviction to R/A	Eviction notice from Unit/Accommodation Contractor
Own Home	House contract Tenure from Defence
Courses	Joining Instruction/Posting Order
Overseas Deployment	Unit CO Recommendation
Director General Approved	Respective Director General Approval
Operational or extenuating circumstances that require removal on particular date	Approval for Mandatory Uplift Date from Unit chain of command

You can contact us by:

Free call: **1800 819 167**

Email: **defencecare@tollgroup.com**

Web: **www.tolltransitions.com.au/defence**

Please return this completed form to your local Toll Transitions Relocation Service Centre or submit the form online at www.tolltransitions.com.au/defence

You can contact DHA by:

Phone: **139 DHA** (8:30am - 5:00pm)

Web: **www.dha.gov.au**



Application for Relocation

Office Use Only	TT Case No. <input type="text"/>
Relocation Approved by	<input type="text"/>
	(TT delegates signature and printed name)
Date	<input type="text"/> / <input type="text"/> / <input type="text"/>

Part A Personal details

1. Service number

Employee ID number

2. Title/Rank (WORN)

3. Full name

Surname

Given names

4. Service: Navy Army Air Force

Reserve Other

Foreign Defence Exchange personnel

Country

5. Date of birth / /

6. Gender Male Female

7. Your current contact details — Home address

State Postcode

Postal address (if same as home address write 'AS ABOVE')

State Postcode

Work address

Position/Job title

Unit Base

Unit location

Street address

Phone numbers

Work (STD)

Home (STD)

Mobile

Fax numbers

Work (STD)

Home (STD)

Email address

Work

Home

8. Preferred method of communication (how Toll Transitions will contact you)

Telephone Work Home Mobile

Fax Work Home

Email Work Home

Correspondence Work Home Postal address

Part B Gaining Unit/Base and relocation details

9. Rank at gaining Unit/Base

Location of new Unit/Base

Gaining location for duty

Administration Unit/Base

10. Reason for relocation

Posting **Course**

Posting effective date / /

Posting authority

Date posting issued / /

Posting tenure: less than 6 months

6–12 months

more than 12 months

Discharge

Discharge effective date / /

Discharge authority

Change in circumstance

Marriage/interdependent partnership recognition Change in dependant status

Recognition of special needs Own home

Exchange of service residence DG Approval

Recall to service residence Death

Breakdown of marriage Overseas deployment

Eviction from RA

LIA eviction into RA

Required date for relocation / /

Dependant/Child 6

Surname

Given names

Date of birth / /

Gender Male Female

Relationship to you (e.g. son, daughter)

What type of school will this dependant attend at your new location? Will not attend school

Primary

Secondary

Tertiary

Dependant/Child 7

Surname

Given names

Date of birth / /

Gender Male Female

Relationship to you (e.g. son, daughter)

What type of school will this dependant attend at your new location? Will not attend school

Primary

Secondary

Tertiary

Dependant/Child 8

Surname

Given names

Date of birth / /

Gender Male Female

Relationship to you (e.g. son, daughter)

What type of school will this dependant attend at your new location? Will not attend school

Primary

Secondary

Tertiary

If more than 8 dependants will accompany you on this posting, please provide details on a separate sheet.

15. Will you need to return to your old locality to assist with the uplift?

Note: Toll Transitions is responsible for booking travel if you are approved to return.

No

Yes Expected date of return / /

Please ensure travel requirements are completed in Part E, Question 25.

Part C Housing Considerations

16. Which permanent accommodation type are you vacating?

- Living In Accommodation (LIA)
- Service Residence (SR)
- Own Home
- Rent Allowance (RA)
- Other (Own Means)

17. Do you need permanent housing in your new location?

Yes **Permanent Accommodation Solution**

MWD
Service Residence **Go to Q18**

MWOD/MWD(U)
LIA **Go to 17a**
RA **Go to 17a**

No I will be occupying:

Own Home **Go to Q17a**
Other **Go to Q17a**

17a. Do you require Transit LIA?

No **Go to Q20**
Yes **Go to Q20**

Toll Transitions staff aim to provide you with an accommodation solution that takes into account your Defence entitlement and family composition and, where possible your preferences, however, the solution is dependent on available options.

18. Preferred type of permanent accommodation (tick one only)

Standard house

Unit/Townhouse

19. Do you have a preferred area to live within the new location?

No

Yes List suburbs in order of preference

20. Details of your pets (if applicable)

Type of pet (e.g. cat, dog)	Sex	Age	Breed and size (small, medium, large)	Desexed	
				No	Yes
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Do you, or any member of your dependent family, own a residential property in the new location?

No ► **Go to Q22**
 Yes

Give details of the residential property

Address

State	Postcode

Number of bedrooms

Do you intend to live at this residential property during this posting?

No ► Please provide reason

Yes ► Date of intended occupancy

/		/	
---	--	---	--

Is this residential property currently tenanted?

No

Yes ► Date the lease expires

/		/	
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Is there a Release Clause?

No

Yes

If more than one property, please provide details on a separate sheet.

Part D Other considerations

22. Please state here the requirements for housing that you have as a result of being recognised as a family with special needs in accordance with DI(G) PER 42-5.

Is the special need for: Housing Travel Temporary accommodation

Give a brief summary and attach a copy of *Recognition, Family with Special Needs Letter*, as approved by Defence Community Organisation (DCO).

If you need more space, please attach a separate sheet.

23. Please state any other circumstances or personal preferences (not already included in this application) that you believe should be taken into account regarding your relocation. This could include specific job requirements, which will assist in determining your housing requirements, and may require Defence approval.

If you need more space, please attach a separate sheet.

Part E Travel details

24. Please advise how Toll Transitions can contact you while you are in transit.

Mobile phone number	<input type="text"/>	Other person – name	<input type="text"/>
Email	<input type="text"/>	Phone number	(<input type="text"/>) <input type="text"/>

25. How will you and your dependants (if relevant) get to the new location?

Own vehicle ► **Fill in the relevant details in Parts (i) and (ii)**
 Other ► **Complete Part (i)**

Part (i) – Please provide details of the travel required.

First name	Preferred mode of travel (air, car, rail, boat, bus, own means)	Departure location			Arrival location		
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM
		Departure date	/ /	AM/PM	Arrival date	/ /	AM/PM

Part (ii) – If driving own vehicle please complete.

If it is your intention to freight one or more of your vehicles you will need to complete question 30.

Vehicle 1

Vehicle make

Model

Engine (cubic capacity)

Registration number

State

Registration expiry date / /

Will you be towing anything?
 No
 Yes ► Item description (e.g. trailer)

Registration number State

Will any person (other than your spouse or the dependants you have named on this form) be travelling with you?
 No
 Yes ► Is this person in the ADF?
 No
 Yes ► Their name

 Employee ID number

Vehicle 2

Vehicle make

Model

Engine (cubic capacity)

Registration number

State

Registration expiry date / /

Will you be towing anything?
 No
 Yes ► Item description (e.g. trailer)

Registration number State

Will any person (other than your spouse or the dependants you have named on this form) be travelling with you?
 No
 Yes ► Is this person in the ADF?
 No
 Yes ► Their name

 Employee ID number

Part F Furniture and effects

26. Do you have any items currently in storage at Commonwealth expense?

No

Yes Location of items (e.g. city and state)

Preferred delivery date

Delivery address

State	Postcode

27. Relocation details for your furniture and effects

If your removal has more than one part, (e.g. direct delivery to a residence temporary storage, delayed delivery to a residence), please provide an inventory for EACH part. Please note that while you nominate preferred pre-pack and uplift dates, Defence may require you to move on any day within the week of your preferred dates.

Inventory A

Inventory submitted electronically to Toll Transitions Inventory attached

Preferred pre-pack date

Preferred uplift date

Uplift address

State	Postcode

Preferred delivery date

Delivery address

State	Postcode

Inventory B

Inventory submitted electronically to Toll Transitions Inventory attached

Preferred pre-pack date

Preferred uplift date

Uplift address

State	Postcode

Preferred delivery date

Delivery address

State	Postcode

28. Will you have items requiring long-term storage or overflow storage?

No

Yes Complete Q29 – Inventory C (Approval to be given by Toll Transitions)

Reason/Comments

29. Inventory C – Items for Long Term Storage

Inventory submitted electronically to Toll Transitions Inventory attached

Preferred pre-pack date

Preferred uplift date

Uplift address

State	Postcode

30. Do you have any vehicles/towable items that need to be transported to the new location (other than the ones already listed at question 25 – Part ii)?

No

Yes Give details

Item 1	Item description (e.g. car)	<input style="width: 95%; height: 15px;" type="text"/>
	Make	<input style="width: 95%; height: 15px;" type="text"/>
	Model	<input style="width: 95%; height: 15px;" type="text"/>
	Registration number	<input style="width: 95%; height: 15px;" type="text"/>
	State	<input style="width: 80%; height: 15px;" type="text"/>
	Location from	<input style="width: 95%; height: 15px;" type="text"/>
	Preferred Uplift Date	<input style="width: 100%; height: 15px;" type="text" value="/ /"/>
	Location to	<input style="width: 95%; height: 15px;" type="text"/>
	Preferred Delivery Date	<input style="width: 100%; height: 15px;" type="text" value="/ /"/>

Item 2	Item description (e.g. car)	<input style="width: 95%; height: 15px;" type="text"/>
	Make	<input style="width: 95%; height: 15px;" type="text"/>
	Model	<input style="width: 95%; height: 15px;" type="text"/>
	Registration number	<input style="width: 95%; height: 15px;" type="text"/>
	State	<input style="width: 80%; height: 15px;" type="text"/>
	Location from	<input style="width: 95%; height: 15px;" type="text"/>
	Preferred Uplift Date	<input style="width: 100%; height: 15px;" type="text" value="/ /"/>
	Location to	<input style="width: 95%; height: 15px;" type="text"/>
	Preferred Delivery Date	<input style="width: 100%; height: 15px;" type="text" value="/ /"/>

Part G Temporary accommodation

Toll Transitions staff aim to provide you with temporary accommodation that takes into account your Defence entitlement and family composition.

31. Will you need temporary accommodation in your current location?

No

Yes Other requirements, e.g. cots, pram access etc. (if no preference leave blank).

32. Will you need temporary accommodation in your new location?

No

Yes Other requirements, e.g. cots, pram access etc. (if no preference leave blank).

33. Do you have a preference for a smoking or non-smoking room?

Smoking

Non-smoking

34. For calculation of Disturbance Allowance and to enable certification of the number of Departmental moves recorded in our records, please state the number of moves you have had at Departmental expense (including this one).

Part H Declaration

35. Declaration by MEMBER

I understand that Toll Transitions will collect, store and use or disclose information contained in this Form for the purposes set out on the first page. I acknowledge that it is Toll Transitions' usual practice to give some or all of my personal information (including relocation details) to the agencies and organisations identified on the first page.

I acknowledge that in order to be able to provide the services listed on the first page Toll Transitions needs to be able to provide some or all of my personal information (including relocation details) to the Department of Defence and to contractors and accordingly consent to this use of my personal information. I acknowledge that Toll Transitions may in certain circumstances also disclose personal information to the other persons, agencies and organisations identified on the first page.

- The information I have provided in this Form is true and accurate. I am aware that the giving of false or misleading information, documents or statements to Toll Transitions is a serious offence under the *Commonwealth's Criminal Code 1995* and the *Defence Force Discipline Act 1982* and that this legislation imposes substantial penalties, including imprisonment, for committing these offences. Any entitlement provided to me as a result of such conduct may be recovered.

- Commonwealth indemnity does not apply to vehicles/towable items being transported or while they are parked or stored awaiting uplift or collection. Information obtained during the course of the assessment of my relocation or housing requirements may be provided to the Department of Defence and external service providers for the purpose of managing my housing requirements and relocations.

Signature of Member

Date

 / /

Part I Discharge Declaration

36. Declaration by MEMBER on discharge from the ADF

My address prior to enlistment was

State	Postcode

It is my bona fide intention, on termination of my service, to take up residence at the following address and I apply for removal at Departmental expense to that destination.

State	Postcode

- I understand that, in the event of my furniture and effects being moved into storage, I will be responsible from the date of delivery into storage for both storage charges and insurance monthly in advance.
- I undertake to refund the cost of removal in the event of my failure to complete my engagement, or circumstances arising in which I will not qualify for a removal on discharge.
- In the event of my claim for discharge being cancelled or withdrawn after the removal has taken place, I understand that I will be responsible for any additional costs incurred on removal to my new posting locality, less the cost Defence would ordinarily be responsible for.
- The information I have provided in this Form is true and accurate.
- I am aware that the giving of false or misleading information, documents or statements to Toll Transitions or the Department of Defence is a serious offence under the *Crimes Act 1914* and the *Defence Force Discipline Act 1982*, and that these Acts impose substantial penalties, including imprisonment, for committing these offences. Any entitlement provided to me as a result of such conduct may be recovered.

Signature of Member

Date

 / /

Returning the Application for Relocation

Please return this completed form to your local Toll Transitions Relocation Service Centre (RSC). Alternatively you may complete the AFR online at www.tolltransitions.com.au/defence

Keep a photocopy of the completed form for your records.



STAFF-IN-CONFIDENCE
Department of Defence and Toll Transitions



Direct Credit Authorisation

The Department of Defence and Toll Transitions require you to complete this form to provide your bank account details as set out below for the purpose of Direct Credit payment of allowances and entitlements (other than salaries) to staff. This information you provide is safeguarded by the *Privacy Act 1988*, which prevents the information from being used other than for the purposes for which it is collected.

The information provided will be collected and used by the Department of Defence and Toll Transitions to process your relocation allowances and entitlements, and lodge payment via Electronic Funds Transfer (EFT) directly into your bank account. As part of this process your particulars will be inserted or recorded in Toll Transitions' Finance System. As part of Toll Transitions' responsibility for Defence relocations, details may be used by either the Department of Defence and/or Toll Transitions.

You must be aware that in certain circumstances, this personal information may be provided to other organisations on a need-to-know basis, for reasons such as law enforcement, or in connection with legal proceedings. Please see overleaf the list of organisations included for these purposes.

Staff details

I authorise the Department of Defence and Toll Transitions Australia to record and use the details provided for the purpose of Direct Credit payment of Departmental allowances and entitlements. I also authorise the release of information contained in this form to any of the organisations listed overleaf.

Rank or Title		
<input type="text"/>		
Service		
<input type="text"/>		
Employee ID Number (PMKeys)		AGS Number
<input type="text"/>		<input type="text"/>
First Given Name	Middle Initial	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Work Address		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
Current Telephone Number		
Home	Work	Mobile
<input type="text"/>	<input type="text"/>	<input type="text"/>

Bank or Financial Institution Name		BSB (Bank State Branch) Number
<input type="text"/>		<input type="text"/>
Town or Suburb	State <small>(This must be a six digit number)</small>	
<input type="text"/>	<input type="text"/>	
Account Name	Account Number	
<input type="text"/>	<input type="text"/>	
<small>(Not Account Type)</small>	<small>(Not credit/debit card number or number on actual card)</small>	

The information I have provided in this application is true and correct. I am aware that the giving of false or misleading information, documents or statements to the Department of Defence and Toll Transitions is a serious offence under the *Commonwealth's Criminal Code 1995*, and that the Criminal Code imposes substantial penalties, including imprisonment for committing these offences.

Member's signature

Date



STAFF-IN-CONFIDENCE
Department of Defence and Toll Transitions



PLEASE NOTE

Organisations to whom this personal information may be provided on a need-to-know basis, for reasons such as law enforcement, or in connection with legal proceedings include: Centrelink, the Australian Taxation Office, Courts or Tribunals, Commonwealth or State Departments/Agencies where there is an obligation under law to provide it, Department of Social Services, Law enforcement agencies including the police, the Department of Defence's and Toll Transitions' legal representatives.

All members undertaking relocation are required to complete and submit this **Direct Credit Authorisation** form, which is used in the Application for Relocation (AFR) instead of the Department of Defence Direct Credit Authorisation Form AC 839, but it does not replace the use of Form AC 839 in any other circumstances.

This **Direct Credit Authorisation** form will enable both the Department of Defence and Toll Transitions to process your relocation allowances and entitlements, and lodge payment via Electronic Funds Transfer directly into your bank account.

It has been approved by the Department of Defence Financial Services Branch, sponsor of the Department of Defence Chief Executive Instructions (CEIs).

If you have any questions about the **Direct Credit Authorisation** form, please contact your local Relocation Service Centre (RSC).

Office Use Only

Operator Name	Signature	Date entered

STAFF-IN-CONFIDENCE