Queensland Government

DVA DIRECT DEDUCTION FACILITY (DDF) AUTHORITY FOR CEASING HOUSING PAYMENTS

Please complete this form if you want the Department of Housing to cancel your automatic payment deductions. If you are **not** terminating your tenancy with the Department of Housing, you will need to continue making payments at the Australia Post Office, using the barcode on your payment slip. If you do not have a payment slip, contact your nearest Housing Service Centre.

About you

Surname (Family name)	
Given names	
Date of birth	
Your Department of Veterans' Affairs Reference Number	This number can be found on your Repatriation Health Card, Pension Concession Card or Department of Veterans' Affairs correspondence.
Type of Department of Veteran's Affairs payment	
Your rental address	
	Suburb/Town
	State: Queensland Postcode
Your telephone number	Home ( ) Work ( )

About your payments to the Department of Housing

What date do you want the deductions to end?	/ /	You may need to allow up to four days for your cancellation to be processed

Type of payment to be cancelled	(please tick)	Payment Reference Number
Rent	☐	
Rent arrears repayment	☐	
Maintenance/other repayments	☐	
Extra payments	☐	

Your Signature _____   **Date:** ____ / _____ / _____

Please return completed form to your nearest Housing Service Centre.

Privacy Notice

The Department of Housing is collecting your personal information so we may provide you with housing assistance. To assist you with your housing needs and services, your personal information may be disclosed to partner agencies, service providers, local governments and non-governmental agencies that now, or will, provide you with housing and/or support services. Unless authorised or required by law, your personal information will not be disclosed to any other third party without your consent. More information about the Department's privacy obligations is available on our website at **www.housing.qld.gov.au**.

Housing Service Centre use only

Date form received: _____ / _____ / _____   Date entered in Reside: _____ / _____ / _____

Processing officer's name: _____