Application for Grant for Emergency Alarm System
(Pursuant to Section 25(1) of the Housing Ordinance (Cap.283)

Part I Eligibility Criteria

Any household members of a public rental housing (PRH) flat may apply for the Grant for Emergency Alarm System (EAS Grant). PRH residents applying for the EAS Grant must fulfill the following eligibility criteria:

1. All household members are aged 60 or above.
2. The Applicant must fulfill the following criteria:
   a. not receiving Comprehensive Social Security Assistance from the Social Welfare Department (SWD);
   b. (the Applicant and/or his/her spouse) being subject to the income and assets limits for Old Age Living Allowance prescribed by SWD;
   c. aged 65 or above. For applicants aged 60 to 64, they should provide documents certified by a public medical officer to prove that they are more than 50% disabled or suffering from such medical conditions which could develop life threatening conditions as to require immediate attention. No medical certification is needed for those receiving disability allowance from SWD for being 100% disabled or in need of constant attendance; and
   d. never received an EAS Grant from SWD or the Hong Kong Housing Authority (HA).
3. The tenancy condition and occupancy position are in order.
4. The household has not breached any terms of the tenancy agreement.

Part II Notes of Application

1. The Applicant must submit the duly completed Application Form, together with the Tenancy Agreement and all the required information and supporting documents (e.g. income proofs, bank passbooks, medical certificates, etc.), to the Estate Office concerned. Failure to provide sufficient information will deter HA from processing this application.
2. The term ‘tenancy’ in this Application Form includes ‘Occupation Licence for Interim Housing’, and ‘tenant’ includes Licensee of the Occupation Licence for Interim Housing’.
3. This Application is free of charge. Anyone who offers to provide assistance in return for remuneration should be reported to the Independent Commission Against Corruption (ICAC) immediately. Attempted bribery is also an offence in law. HA will refer the case to ICAC for investigation and cancel the application, irrespective of whether such person has been prosecuted or convicted of the relevant offence.
4. The personal data in this Application Form are furnished to HA for the purpose of EAS Grant application. Pursuant to the Personal Data (Privacy) Ordinance, the Applicant is entitled to request access to or correction of the personal data stated in this Application Form. Where necessary, such requests should be made in writing and directed by post or fax (No. 2761 6363) to the Departmental Data Protection Officer of Housing Authority Headquarters, 33 Fat Kwong Street, Homantin, Kowloon. A fee may be charged for the request for access to personal data.

The income and asset limits for applicants and the relevant computation method are based on the prevailing limits and eligibility criteria for Old Age Living Allowance prescribed by SWD. Applicants may browse the relevant information on the SWD website: www.swd.gov.hk [Public Services> Social Security> Social Security Allowance Scheme: Application for Social Security Allowance Guidance Notes (Eligibility Criteria: Income and Assets Limits for Old Age Living Allowance applicants)], and the SWD hotline is 2343 2255.

* The income and asset limits for applicants and the relevant computation method are based on the prevailing limits and eligibility criteria for Old Age Living Allowance prescribed by SWD. Applicants may browse the relevant information on the SWD website: www.swd.gov.hk [Public Services> Social Security> Social Security Allowance Scheme: Application for Social Security Allowance Guidance Notes (Eligibility Criteria: Income and Assets Limits for Old Age Living Allowance applicants)].
Part III  Personal Data of the Applicant and Other Household Members

I (the Applicant), ________________, am the *Tenant / household member (Relationship with Tenant: ________________) of Flat __________, *Block __________/ __________ House, __________ Estate.

*I am a single person (including single, widow, widower, divorcee and a person whose spouse is not residing in Hong Kong). My current total monthly income* is $______________ on average (excluding contributions from relatives or friends, old age and disability allowances) and my total asset value* is $______________.

*I am a married person. The current total monthly income* of my spouse and I is $______________ on average (excluding contributions from relatives or friends, old age and disability allowances) and our total asset value* is $______________. (The spouse is also required to sign the declaration in Part IV of this Application Form)

Part IV  Declaration of the Applicant and his/her Spouse

I/ We agree and declare that:
(1) From the date of this application to the effective date of the EAS Grant (if granted), if I am/ we are in breach of any terms of the Tenancy Agreement in respect of the above premises, HA may cancel this application.
(2) I/ We have not received from SWD any Comprehensive Social Security Assistance, and are not in receipt of any EAS Grant from SWD or HA.
(3) All the above particulars furnished in this Application Form are true and correct. I/ We understand that by virtue of Section 26(1)(a) of the Housing Ordinance (Cap. 283), any person who knowingly makes any false statements to HA in respect of any particulars specified in this Application Form shall be guilty of an offence and shall be liable on conviction to a fine at Level 5 as specified in Schedule 8 to the Criminal Procedure Ordinance (Cap. 221) and to imprisonment for 6 months (as at the date of the revision of this Application Form, the maximum fine at Level 5 is HK$50,000).
(4) HA and Housing Department (HD) may, in processing my/our application, collect my/our personal data from other relevant government departments, public/private organisations (such as financial institutions and banks), and/ or any other third party (such as employers) possessing my/our personal data for verification and confirmation of my/our eligibility. Whilst the collection of the information is in progress, the personal data contained herein may be disclosed to the abovementioned organisations and/ or any other third party. In this connection, I/ we authorise these organisations and/ or any other third party possessing my/our personal data to furnish HA and HD with my/our personal data for the vetting of my/our application.
(5) All my/our personal data and supporting documents which I/we provide for this application will be disclosed to the relevant Estate Office (including outsourced property services agents) for handling my/our application, implementation of public housing policies and enforcement of the terms of PRH tenancy agreement.
(6) I/ We fully understand all the terms contained in Parts I, II and IV of this Application Form. I am/ We are aware that if I/ we do not fully understand any of the abovementioned terms, I/ we may make enquiries and seek clarification with the staff of the Estate Office concerned before signing this Form.

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<tr>
<th>Name</th>
<th>H.K.I.C. No.</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Applicant</td>
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<tr>
<td>Spouse of Applicant</td>
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Part V  Declaration of the Tenant (to be signed by the Tenant who is not the Applicant)

I agree to the above application.

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<tr>
<th>Name</th>
<th>H.K.I.C. No.</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Tenant</td>
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* Delete if inapplicable
Part VI  (For Office Use Only)

Investigation Report (completed by HO)

The applicant is /has:
(a) □ Not receiving CSSA.
(b) □ Living alone or in household with all members aged 60 and over.
(c) □ Declared asset and monthly income not exceeding the OALA limits. Monthly Income Limits: __________ Asset Limits: __________
(d) □ Aged 65 or above.
(e) □ Aged 60 to 64.
(f) □ In receipt of a standard rate for being 100% disabled or in need of constant attendance.
(g) □ Suffering from such medical conditions, which in a public medical officer’s opinion, could develop life threatening conditions as to require immediate attention.
(h) □ Never received any EAS Grant from Social Welfare Department or the HD.

Other eligibility criteria
(a) □ Occupancy position *is/is not in order
(b) □ The household *has/has not breached the tenancy conditions
(c) □ *With/Without tenant’s consent. (Exemption may be given at the discretion of the Housing Manager for exceptional cases.)

Recommendation (completed by HO)

Application for the EAS Grant is:
□ Recommended.
□ NOT recommended. Reason(s):
Reason(s): ____________________________________________

Approval (completed by AHM/HM  Signature is NOT required if approval is sought via e-minute)

□ Application is *approved / not approved, with recommended action(s) agreed.

Reported by:

HO/(                  )  Signature    Date

Recommended by:

AHM/(                  )  Signature    Date

Approved by:

HM/(                  )  Signature    Date

* Delete whichever is inappropriate
□ Tick in the appropriate box(es)