

Civil Defence Payments to Evacuees application



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Civil Defence Payments are available to meet the immediate needs of people who are resident in an area where a civil defence emergency has been declared and are required to leave their home.

Write your MSD client number here if you know it. This number can be found on your Community Services Card if you have one.

Client number

 | |

Tell us about yourself

Tell us your details

1

What is your full name?

First and middle names

Surname or family name

2

What date were you born?

Day Month Year

3

What was your address before the event?

Flat/House number Street name

Suburb

Town/City

4

What is your current address?

Flat/House number Street name

Suburb

Town/City

HOW TO ANSWER Q5:

Please only give us contact details you'd like us to use.

5

How else can we contact you?

Tick the best way for us to first contact you

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

6

Who is your next of kin and how can we contact them?

First and middle names Surname or family name

Flat/House number Street name

Suburb Town/City

Home phone Mobile phone

() ()

Email

Tell us about your dependent family

7

Are any dependent members of your family (eg children, elderly relations) affected by the civil defence emergency?

No [Go to question 8](#) Yes [Please provide details below](#)

Person 1

Full name

Relationship to you Date of birth

Day Month Year

Person 2

Full name

Relationship to you Date of birth

Day Month Year

Person 3

Full name

Relationship to you Date of birth

Day Month Year

Person 4

Full name

Relationship to you Date of birth

Day Month Year

Person 5

Full name

Relationship to you Date of birth

Day Month Year

Person 6

Full name

Relationship to you

Date of birth

Day Month Year

Person 7

Full name

Relationship to you

Date of birth

Day Month Year

Tell us what help you need

8

Tell us what help you need?

9

Have you been required to leave your home as a result of the emergency or are you unable to return to your home because of the emergency?

No

Yes



Please give details below

Tell us about your insurance cover

10

Do you have any insurance cover?

No

Yes



Please give details below

Name of insurance company

What is the excess on your policy?

\$

11

Does your insurance policy cover:

Loss of clothing

No

Yes

Unsure

Loss of earnings

No

Yes

Unsure

Loss of food

No

Yes

Unsure

Temporary accommodation

No

Yes

Unsure

Payment Schedule

Food, clothing or bedding

12

INFORMATION FOR Q12:
This will be paid to the supplier, where possible.

What payments do you need for food, clothing or bedding?

Name of Supplier 1

Payment for food
\$

Payment for clothing
\$

Payment for bedding
\$

Supplier's bank account number:

Bank	Branch	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Verified by Work and Income staff

Form of ID

Name of Supplier 2

Payment for food
\$

Payment for clothing
\$

Payment for bedding
\$

Supplier's bank account number:

Bank	Branch	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Verified by Work and Income staff

Form of ID

Temporary accommodation costs

13

INFORMATION NOTE FOR Q13:
This will be paid to the supplier, where possible.

What are your temporary accommodation costs?

Name of Supplier

Cost of billet \$ per day Number of days

Cost of motel/hotel \$ per day Number of days

Cost of other accommodation \$ per day Number of days

Name of Supplier

Supplier's bank account number:

Bank	Branch	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Verified by Work and Income staff

Form of ID

Loss of livelihood costs

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Tell us about your loss of livelihood

Loss of wages/salary \$ net (after tax) each day, to date

Period unable to work days to date

Employer's name

Employer's contact details

Address	<input type="text"/>	
Phone number	(<input type="text"/>)	Mobile (<input type="text"/>)
Email	<input type="text"/>	

I am unable to attend work and my employer has stopped paying wages/salary No Yes

I am self employed and am unable to engage in business and have lost income due to the civil defence emergency No Yes

I am available for alternative work (eg clean up operations) No Yes

The bank account is in the name of:

The account number is:

Bank	Branch	Account number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Verified by Work and Income staff

Form of ID

Declaration and signature

If my insurance policy covers any payments made by the Ministry of Social Development I will refund this amount to the Ministry of Social Development.

If there are any changes to my situation I must notify the Ministry of Social Development immediately.

The information I have given you is true and complete. I understand it may be verified by the Ministry of Social Development with Civil Defence, employers, accommodation providers, etc.

I understand what you do with my personal information and how you protect my privacy.

Applicant's name (print)

Applicant's signature

Day Month Year

You must give us all the information we need.

If you don't have all the information we need, talk with us and we may be able to help.

If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop payments. You might need to pay money back. In some cases you could even be prosecuted.



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