

First Peoples Home Ownership Program

Conveyancing Agents & Trust or PEXA Confirmation
Form

Acknowledgement to Homes Victoria

Under the First Peoples Home Buyers Program

On behalf of the Applicant

I, (Full name of Solicitor/Conveyancer)

..... (Practitioner ID of Solicitors/Licence Number for Conveyancers)

Of the firm, (Name of legal/conveyancing practice)

..... (Address of legal/conveyancing practice)

Acknowledge as follows:

- I act for the Applicant(Name of Applicant/s)
in the purchase of a property located at (Property), who has applied to receive
the following grant/s contributions under Homes Victoria's - First Peoples Home Ownership Program (Program):
 - Home Buyer Booster** – an amount of \$2,500 to contribute towards Professional legal fees including disbursements and administrative costs. This is also inclusive of contributions towards Building inspections (e.g. survey and pest reports) and property valuations.
 - Land transfer (Stamp) Duty Helper**– a grant contribution, matching up to \$10,000 of land transfer duty cost incurred through the transfer of land into the person's name. The grant amount will be determined based on the actual land transfer duty payable, up to a maximum of \$10,000.
 - Deposit Contribution** – For every dollar you contribute towards your deposit, we'll match it up to a maximum of \$20,000
- I hereby confirm that on behalf of(Name of legal/conveyancing practice)
that I am duly authorised as principal to receive trust money on behalf of the Applicant/s.
- I will liaise with Homes Victoria to register my firm in the Homes Victoria system, to receive the grant/s
contributions specified above, for the above names Applicant/s, as per the Program Deed dated __ / __ / __
(Deed)
- I hereby provide my firm's trust/PEXA account details to Homes Victoria in the attached *Authority for Electronic Funds Transfer* for the grant contribution outlined in point [1], to be held in trust for the Applicant/s.

Account Name:

BSB:

Account Number:

Bank/Financial Institution:

Address of Branch:

Amount:

- \$2,500 – for the Home Buyer Booster Grant (no GST included)
- \$XX – for the Land Transfer (stamp) Duty Helper Grant
- \$XX – for the Deposit Match Grant

5. I will hold the grant contribution in trust to be used under instruction for the Property settlement purchase in accordance with the Program Deed.

Signature:

Address:

Solicitor/Conveyancer:

Dated:

The completion and submission of the form below is required for your company to be established as a vendor within the Department's financial system to enable the processing of payments.

Department of Health or Department of Families Fairness and Housing
Application for Vendor & EFT creation

Entity Name	
Trading Name (if different)	
ABN	
Street Address:	
Postal Address:	
E mail Address	
Contact Person (Agency/company):	
Contact Position Title	
Telephone Number:	
Financial Institution Name:	
Branch Address:	
BSB code: (eg xxx-xxx)	
Account Number:	
Account Name:	
Signature of Authorised representative:	
Date:	

*PLEASE RETURN THIS SIGNED FORM AS A PDF