



Australian Government

Aged Care Pricing Commissioner

Application Form Part 2

Applying to the Aged Care Pricing Commissioner
for accommodation prices that are higher than the
maximum amount determined by the Minister

Part 2 – for additional accommodation groups

Submitting your application  or 

Once completed, this application form must be emailed to acpcapplications@acpc.gov.au as a PDF. Attachments may also be submitted electronically, or mailed in hard copy to the **Office of the Aged Care Pricing Commissioner, Locked Bag 5, Haymarket NSW 1240**. Any such attachments should be referred to in the covering email.

All information provided for the purposes of an application will be held confidentially by the Aged Care Pricing Commissioner, and will not be shared with any other person or agency.

Application form

1. Facility and accommodation group details

Name of facility

Title of accommodation group

Proposed price per resident as a Refundable Accommodation Deposit \$

Number of rooms in the accommodation group

Room numbers/location

Maximum number of residents per room

Size of rooms (including ensuite). Where there is a range of room sizes, please provide the range.

Access to private ensuite

Yes ☐ No ☐

Are the rooms offered on an Extra Service basis? *

Yes ☐ No ☐

**Where the facility has Extra Service status which applies to the rooms in question, please provide your Extra Service benchmark list or the relevant section from a resident agreement in an attachment.*

Where rooms in this accommodation group have previously received approval to charge a higher amount, please identify the rooms.

2. Quality, condition, size and amenity of rooms and common areas

Please describe below the quality, condition, size and amenity of the rooms in the accommodation group, and the common areas in the facility. This information should be comprehensive to support your proposed price. Where you have otherwise supplied this information in supporting narrative or attachments, please indicate below. Where relevant, please provide sufficient information to differentiate these rooms from rooms in other accommodation groups, and/or other rooms in the facility for which you are not seeking a higher price.

Room description

2.1 Describe the quality, condition and size of the rooms, including furniture, fittings, design features and any other factors relevant to resident amenity. This description must be supplemented by photographs of a representative room in the accommodation group.

Application form

2. Quality, condition, size and amenity of rooms and common areas (continued)

Common areas

2.2 Describe the quality and condition of the common areas in the facility that would be accessible to these residents. Include where relevant any specific accommodation or design features of the service which are considered relevant to the determination of price. Please also provide an approximate size of common areas. This description must be supplemented by photographs of the relevant common areas.

Facilities and services

2.3 Describe any facilities or services to residents particular to this accommodation group (if specific to this accommodation group and different from the description provided in the Application Form – Applying to the Aged Care Pricing Commissioner for accommodation prices that are higher than the maximum amount determined by the Minister). Include where relevant any specific design features of the residential aged care facility. Please do not include care and services that are basic care and services specified in the *Quality of Care Principles 1997*. Where care and services are provided through an Extra Services arrangement or another additional care and service arrangement, please indicate this.

Declaration

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I declare that the information supplied is true and correct and I have not withheld any information likely to affect the assessment of this application.

Name

Date

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Submitting your application



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Locked Bag 5, Haymarket NSW 1240.