



## Notification of a Death of a Resident

*Residential Services (Accreditation) Act 2002*

This form is effective from 28 November 2024

ABN: 86 504 771 740

### Instructions

This form is to be used to notify a death of a resident in a level 3 accredited residential service as required under section 81A of the Act. A failure to notify as required under section 81A of the Act may attract a penalty of up to 50 penalty units.

### Please note:

- The Notes accompanying this form should be read before completing this form
- Use BLOCK letters
- Attach extra pages if necessary
- All dates should be DD/MM/YYYY
- If you require further information regarding this form, please contact Regulatory Services on 07 3013 2666 or call 13 QGOV (13 74 68) for after hours enquiries.

### Privacy statement—please read

The Department of Housing and Public Works is collecting your personal information in accordance with the *Residential Services (Accreditation) Act 2002* in order to process your application. Your personal information will also be provided to the public upon request through the Register of Residential Services or may be disclosed to the Residential Tenancies Authority, the Office of the Public Guardian, the Department of Justice and Attorney General or to other Federal, State and Local government agencies in the performance of a function of, the *Residential Services (Accreditation) Act 2002* or as required or permitted by law. Your personal information will be handled in accordance with the *Information Privacy Act 2009*.

### Fee

No application fee is required.

## Part 1—Residential service address

<b>Address of residential service where the resident lived</b>	Name of residential service (if applicable) .....
	Address .....
	Suburb ..... State ..... Postcode .....

## Part 2—Registered service provider details

<b>Registered service provider</b>	Registration (RS) number: .....
	Have there been any changes to the service provider details as notified on the certificate of registration? No      Yes—Please provide details .....
	Is the service provider an individual or a corporation? Individual—Go to individual service provider Corporation—Go to corporate service provider

**Part 2—Registered service provider details continued**

<p><b>Individual service provider/s</b></p>	<p>Preferred title    Mr    Mrs    Ms    Miss    Other (specify) .....</p> <p>Last name ..... First name .....</p> <p>Address .....</p> <p>Suburb ..... State ..... Postcode .....</p> <p>Phone (business) ..... Mobile .....</p> <p>Email .....</p> <p>Preferred contact method    Phone    Mobile    Email    Mail</p>
<p><b>Corporate service provider</b></p>	<p>Full company/corporation name .....</p> <p>ACN (Australian Company Number) .....</p> <p>Postal address .....</p> <p>Phone (business) ..... Mobile .....</p> <p>Email .....</p> <p>Preferred contact method    Phone    Mobile    Email    Mail</p>


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Please turn over for more details**



**Part 3—Circumstances details continued**

	<p>Is this person the resident’s medical practitioner?  <input type="checkbox"/> No    <input type="checkbox"/> Yes</p> <p>If no, the residents medical practitioner’s details are:          Last name ..... First name .....          Phone (business) ..... Mobile .....          Email .....</p>
<p><b>Resident’s previous incidents</b>          Incidents could include where the resident was involved in a serious incident at the residential service or with other residents</p>	<p>Have there been any previous incidents involving this resident?  <input type="checkbox"/> No    <input type="checkbox"/> Yes</p> <p>Please provide details</p> <p>.....          .....          .....          .....          .....          .....</p>
<p><b>Circumstances of death</b>          Please provide a brief chronology of the circumstances of death.           Please attach any documents that are relevant to the resident’s death.</p>	<p>.....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....          .....</p>

## Part 4—Other relevant information

<p><b>Residential service: prior incidents</b></p>	<p>Have there been any previous deaths at the residential service within the last 12 months?</p> <p>No      Yes</p> <p>If they are due to similar circumstances, please provide details:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>Police notification</b></p> <p>A police officer must be notified of the death if the death is a 'reportable death' under the <i>Coroners Act 2003</i>.</p> <p>This includes the death of a resident with a disability under the <i>Disability Services Act 2006</i> living in a level 3 accredited residential service.</p>	<p>Has the Queensland Police Service been notified of the residents' death?</p> <p>No      Yes</p> <p>Date of notification .....</p> <p>If no, why?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>Person making notification</b></p> <p>This person should be authorised to act on behalf of the service provider</p> <p><b>Sign here</b> </p>	<p>Preferred title    Mr    Mrs    Ms    Miss    Other (specify) .....</p> <p>Last name ..... First name .....</p> <p>Phone ..... Mobile .....</p> <p>Email .....</p> <p>Preferred contact method    Phone    Mobile    Email    Mail</p> <p><b>I have checked the answers I have given on this notification and state that they are true and correct in every detail to the best of my knowledge.</b></p> <p>Name of signatory .....</p> <p>Signature ..... Date .....</p> <p style="text-align: right;">DD / MM / YYYY</p>

## Part 5—Lodgement details

### Lodgement

Please email the completed application and any supporting documentation to [regulatoryservices@housing.qld.gov.au](mailto:regulatoryservices@housing.qld.gov.au) or alternatively by post to the address below.

#### **Regulatory Services**

GPO Box 690  
Brisbane QLD 4001.

If you would like more information regarding this application, contact Regulatory Services on 07 3013 2666, email [regulatoryservices@housing.qld.gov.au](mailto:regulatoryservices@housing.qld.gov.au), or visit our website at [www.housing.qld.gov.au](http://www.housing.qld.gov.au).

After hours enquiries can be made by calling 13 QGOV (13 74 68).

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### Instructions

This form is to be used for a notification of a death of a resident who lives in a level 3 residential service at the time of their death. This includes if the resident dies in another location but is still registered as living at the residential service.

A separate form should be submitted for each resident.

**This form must be provided to the department within 7 days after becoming aware of the death unless the service provider has a reasonable excuse.**

A failure to comply with section 81A of the Act may attract a penalty of up to 50 penalty units.

Note: Only complete the section 'Police Notification' if the death is a 'reportable death' under the *Coroners Act 2003*. You should seek legal advice and/or contact the Coroners Court of Queensland on (07) 3738 7050 or email [CoronersCourt@justice.qld.gov.au](mailto:CoronersCourt@justice.qld.gov.au)

A reportable death includes, but is not limited to, a death where the person had a disability under the *Disability Services Act 2006* and lived in either a Level 3 accredited residential service or government-funded or provided residential service.

There may be other circumstances that make the death a reportable death. If you are unsure if the death is a reportable death, further information is available from Coroners Court website [www.courts.qld.gov.au/courts/coroners-court](http://www.courts.qld.gov.au/courts/coroners-court).