

Home Access 3.0 Application Form

Eligibility Criteria

To qualify for Home Access 3.0, applicant must meet the following criteria:

Income ¹	Total Monthly Gross Household Income (GHI) ≤ \$1,900 <u>OR</u> Per Capita Income (PCI) ≤ \$650
Citizenship	With at least one family member staying at the same residential address who is a Singapore citizen
Dwelling Type	Stays in HDB flat
Others	Neither an existing Home Access beneficiary NOR an existing NEU PC Plus beneficiary with broadband

¹ GHI refers to basic employment income, self-employed income, overtime pay, allowances, cash awards, commissions and bonuses of all family members staying at the same residential address. PCI refers to total monthly gross household income divided by the total number of family members residing in the same residential address.

Monthly Subscription Payable

Your residential home should not have existing fibre broadband. Monthly subscription will be determined based on the applicant's HDB flat type and the choice of Assistance Package, as shown in the table below. Actual device specifications may vary at the point of contract activation.

Assistance Package		Auto Inclusion Reside with a family member who is beneficiary of selected Government assistance scheme ² Monthly subscripti	Tier A Reside in HDB 1-3 Room	Tier B Reside in HDB 4 Room & Above	
Fibre	500Mbps	M1 Limited	\$6.00	\$9.00	\$17.30
broadband	1Gbps	MyRepublic Ltd	\$13.99	\$16.99	\$25.29
Bundled Plans I (Note: Options i			out full-time students³ only)		
500Mbps Fibre broadband with tablet	■ 2GB R	android AM storage	\$8.00	\$15.00	\$22.00
500Mbps Fibre broadband with smartphone	band with - 3GB RAM		\$10.75	\$17.75	\$24.75

² HDB's Public Rental Scheme (PRS); MOE's Financial Assistance Scheme (MOE-FAS); MOE's Special Education Financial Assistance Scheme (SPED-FAS); MSF's ComCare Long Term Assistance (LTA); OR MSF's ComCare Short-to-Medium Term Assistance (SMTA) that receives at least 12 months of continuous assistance.

How To Apply

ONLINE SUBMISSION

<u>Step 1:</u> Visit <u>www.digitalaccess.gov.sg</u> to apply online. You will need to login using your Singpass.

<u>Step 2:</u> All family members staying in same residential address (as reflected on their NRIC) will be prompted to login (via their Singpass) to indicate their consent for the application to be processed further.



HARDCOPY SUBMISSION <u>Step 1:</u> Complete only one application form for all family members staying in same residential address (as reflected on their NRIC).

Step 2: Mail completed application form to:

Infocomm Media Development Authority
PSA Building Post Office, P.O. Box 316, Singapore 911141

For more information, visit www.digitalaccess.gov.sg OR call 6377 3800.

³ A full-time student aged 25 and below studying in a Government / Government-Aided School, Junior College, Centralised Institute, Independent School, Specialised Independent School, Specialised School, Institute of Technical Education, Polytechnic or MOE-funded Special Education School.

Application will be assessed based on your residential address (as reflected on your NRIC) and income information retrieved from Household Means Eligibility System (HOMES).

Particulars of Applicant					
Note: Applicant should be age	ed 21 years and above.				
Full Name (As per NRIC): _					
NRIC No.:	Home	e Tel N	0.:		
Office No.:	Mobil	le No.:			
Email Address:					
Consent on Personal Inform I agree to allow the Gov Participating Agencies^ to co with respect to:	ernment of Singapore			☐ All Participatin☐ All IMDA Sche	_
^ The list of HOMES's Participate https://www.homes.gov.sg/ese		ting Sch	emes can be found h	ere:	
*All IMDA schemes that are part	t of HOMES list of Participa	ting Age	encies and Participatin	g Schemes.	
Assistance Package					
Note: Only 1 choice should submitted.	be selected. You are <u>r</u>	not allo	<u>wed</u> to change the	choice once the a	pplication is
Please select the Assistance	Package you are applying	ng for:			
Fibre Broadband Plan					
☐ M1 - 500Mbps Fibre br	roadband	□ M	lyRepublic - 1Gbps	Fibre broadband	
Bundled Plans Note: Options is applicable	for families without full-ti	me stud	dents only.		
☐ M1 - 500Mbps Fibre broadband with tablet ☐ M1 - 500Mbps Fibre broadband with smartphone					artphone
Beneficiaries of Other Gove	ernment Agencies				
Indicate if you or any family government assistance scher		same	residential address	s) is receiving any c	of the listed
☐ HDB - Public Rental Sc	cheme		MOE - Financial A	ssistance Scheme	
☐ MSF - ComCare Long	Term Assistance		MOE - Special Ed Assistance Schem		
MSF - ComCare Short- Assistance, with at leas continuous assistance			(Note: Please prov	vide approval letter)	
Consent on Media Coverage	e				
As part of the outreach to the benefits. Please indicate your could take the form of media	r consent to be interview	ed for	such case studies,		□ No

Particulars of Family Members living at the same residential address

Note: If you need more row(s) to fill up additional family member, you may fill up such information on photocopy of this page.

Family Member Information		Signatory by family member <u>OR</u> individual acting on behalf [#]
Full Name (as in NRIC): NRIC No.: Relationship to Main Applicant:		
Mobile No.: Email Address: Consent on Personal Information Indicate your consent to allow Government and Participating Agencies^ to collect, use and share my Personal Information with respect to:	☐ All Participating Schemes^	Signature To be completed if consent is given on behalf by: Name: NRIC: Mobile No.: Email Address:
Full Name (as in NRIC): NRIC No.: Relationship to Main Applicant:		
Mobile No.: Email Address:		Signature To be completed if consent is given on behalf by:
Consent on Personal Information Indicate your consent to allow Government and Participating Agencies^ to collect, use and share my Personal Information with respect to:	☐ All Participating Schemes^☐ All IMDA Schemes*	Name: NRIC: Mobile No.: Email Address:

#If another individual is signing the form on behalf as the parent/ legal guardian of the family member who is under 21 years old; acting under a Registered Lasting Power of Attorney granted by family member'; or appointed by the Court under the Mental Capacity Act (Cap. 177A); or as the executor/ administrator of family member's estate.

[^] The list of HOMES's Participating Agencies and Participating Schemes can be found here: https://www.homes.gov.sg/eservice/ParticipatingScheme

^{*}All IMDA schemes that are part of HOMES list of Participating Agencies and Participating Schemes.

Terms and Conditions

- 1. I understand and agree that these phrases used in the application form refers to the following definitions:
 - a. "Personal Information" includes my:
 - i) personal data (e.g. name, NRIC No, address, age, gender, family/household structure and family/household composition);
 - ii) financial data (e.g. income, insurance coverage);
 - iii) consumption data (e.g. housing, healthcare bills, scheme subscriptions);
 - iv) social assistance data (e.g. social assistance history, assessments for eligibility and suitability for social services and public assistance schemes, social worker case reports);
 - v) medical information (e.g. medical reports); and
 - vi) other information (e.g. savings, payment for utilities) provided by me for the evaluation and administration of social services and public assistance schemes.

It includes information collected and kept by various Government ministries, departments and statutory boards, including the following information collected and kept by the Inland Revenue Authority of Singapore (IRAS) and Central Provident Fund (CPF) Board:

- vii) my income information;
- viii) information relating to and derived from my CPF Account(s) and CPF contributions (e.g. CPF Account(s) balance, CPF withdrawal details); and
- ix) information relating to my participation in schemes administered by CPF Board (e.g. medical information, insurance coverage).

Information collected from surveys conducted by IRAS and CPF Board is excluded. Personal Information may relate to past, present or future matters.

- b. "Family" refers to anyone related to me by blood, marriage (including step-children and in-laws) or legal adoption, whether or not they live together with me.
- c. "Schemes" refer to all Participating Schemes.
- d. "Participating Schemes" refer to social services and public assistance schemes provided by the Government and/or Participating Agencies, including:
 - i) healthcare, aged care, childcare, education, employment, housing, social assistance and counselling services and schemes;
 - ii) any form of financial assistance such as subsidies, grants, tax reliefs, vouchers or bursaries; and
 - iii) schemes administered by CPF Board.
- e. "Participating Agencies" refers to statutory boards and organisations approved by the Government to provide the Participating Schemes, and includes any new statutory boards or organisations which may be included from time to time.
- f. "Processing Agency" refers to organisation appointed by IMDA to process applications.
- 2. I hereby declare that the information which I provide herein or in connection with this application is true and correct and that I have not wilfully suppressed and will not wilfully suppress any material fact. If I suppress or have suppressed any material facts or provide or have provided any false or inaccurate information, my application will be rejected and/or the Home Access application withdrawn from me.
- 3. I understand that my application may be rejected by IMDA and/or the Processing Agencies without assigning any reason for doing so.
- 4. I hereby apply for Home Access, subject to the following terms, conditions and undertakings:
 - a. My family stays in HDB flat;
 - b. My family has at least one Singaporean staying in same residential address, as per address stated on NRIC;
 - c. My family is not a current Home Access beneficiary:
 - d. My family is not a current NEU PC Plus beneficiary who has received PC with broadband connectivity;
 - e. My family will not have existing home fibre broadband contract at the time of activating Assistance Package;
 - f. If I had opted to bundle with an internet-enabled device, I will keep the device for the entire contract period;
 - g. I understand I need to pay the required monthly subscription for the entire contract period; and
 - h. I agree to inform IMDA of any change in my residential address or contact information within 30 days.

- 5. I acknowledge that IMDA reserves the rights to recover from me, such amounts as may be due and owing by me to IMDA, should I be found to have falsely declared any information with regard to my qualification to this programme.
- 6. I acknowledge that IMDA and any parties appointed by IMDA reserve the rights to visit me and verify that I possess the device obtained under the Home Access Scheme.
- 7. I declare that I am aware that if I prematurely terminate Broadband Services before expiry of the contract period, the Broadband Service provider may impose early termination charges on me. In the event the Broadband Services is terminated for any reason whatsoever within 24 calendar months of its commencement, I acknowledge that IMDA reserves the rights to require me to bear any and all charges in respect of the Broadband Services for the period between the date of termination and the expiry of 24 calendar months from the commencement of the Broadband Services.
- 8. I acknowledge that I am solely responsible for any use of the Broadband Services, regardless of whether the Broadband Services are used by me or by any other person ("Third Party User"). I will be responsible for the use of the Broadband Services by a Third Party User whether or not I have given permission to the Third Party User to use the Broadband Services. I will ensure that all use of the Broadband Services, whether by me or any Third Party User, complies with applicable laws of Singapore and/or any other relevant jurisdiction.
- 9. I acknowledge that the Broadband Services and any related technology, software, hardware components and data are provided "as is" and "with all faults" and there are no warranties, express or implied, by operation of law or otherwise, made by IMDA with respect thereto. I acknowledge that to the maximum extent permitted by law, IMDA expressly disclaims all implied warranties, terms or conditions of satisfactory quality, merchantability, fitness for a particular purpose, title or non-infringement, and any implied warranties arising out of course of performance, course of dealing or usage of trade, relating to the Broadband Services.
- 10. I will indemnify and keep IMDA indemnified against, and hold IMDA harmless from, any and all loss, damage, claim or expense (including legal expenses) arising from or relating to any of the following:
 - a. Any use by me or a Third Party User of the Broadband Services for any purpose.
 - b. Any failure by me to perform or observe any term or condition of any of the following documents:
 - i) This Application Form
 - ii) Any document between me and IMDA or the Broadband Service provider that relates to the provision or use of the Broadband Services.
 - c. Any interruption, downtime, fault, or loss of use of the Broadband Services.
 - d. Any termination of the Broadband Services.
- 11. I acknowledge that IMDA will not be liable to me or any Third Party User, under any circumstances for any type of loss or damage whatsoever, including loss of profit, savings, business, contracts or revenues, and all other forms of actual, direct, special, incidental or consequential loss or damage, relating to or arising out of any of items listed in paragraphs 10a to 10d above, even if IMDA knew, or should have known, of the possibility of such loss or damage.
- 12. I acknowledge that IMDA may, at its absolute discretion and without providing any reason, terminate the Broadband Services at any time without informing me beforehand, if any of the following occur:
 - a. IMDA has any reason to suspect or believe that the Broadband Services has been used by me or any Third Party User in any illegal, unethical, immoral or improper manner.
 - b. I fail to perform or observe any term or condition in any of the documents listed in paragraph 10b above.
- 13. I understand that the Government and Participating Agencies require my Personal Information for the following purposes:
 - a. to determine if I or the Applicant qualify for the schemes indicated in the Consent on Personal Information section and, if I or the Applicant meet all other eligibility criteria for the schemes indicated in the Consent on Personal Information section.
 - b. to provide me or the Applicant with the schemes indicated in the Consent on Personal Information section.
- 14. I hereby consent and agree that the Government and Participating Agencies may collect, share and use my Personal Information, to the extent permitted by law, for any of the purposes in paragraph 13.
- 15. I understand that the Government and Participating Agencies may, without further reference to me, collect, share and use my Personal Information to determine if I and/or any of my Family members qualify for any or all of the Schemes indicated in the Consent on Personal Information section, and where I and/or my Family member so qualify, to provide such Schemes to me and/or my Family member.

- 16. I understand that the Personal Information collected for the purposes of paragraph 13 and 15 may also be used by the Government and/or Participating Agencies for analysis and evaluation to improve and/or make changes to the Schemes and/or to create new social services or public assistance schemes.
- 17. I understand and consent that, for the purpose of facilitating the offer of Home Access by IMDA, any and all government agencies, statutory boards, voluntary welfare organisations/social service agencies, public healthcare institutions, or community self-help groups that have any of my records may share such records with IMDA (including Personal Information therein) with IMDA, if it is relevant to IMDA's work with us and/or our family.
- 18. I understand and consent that the Personal Information which I provide herein or in connection with this application may be shared with any Participating Agencies, statutory boards, voluntary welfare organisation / social service agencies, public healthcare institutions, community self-help group or person authorised by IMDA, for the purposes of research in which I, as a specific individual, shall not be identified; or for any other purposes prescribed or permitted under Singapore Law.
- 19. I understand that if there are any discrepancies in the Personal Information collected, such discrepancies may be reflected to the relevant Government ministry(ies), department(s) or agency(ies), so that they may take the necessary steps to rectify any inaccurate records relating to me.
- 20. My consent shall remain valid until I withdraw it in writing. I accept that it could take up to 10 working days from the date of receipt by HOMES Administrator before any withdrawal of consent takes effect.
- 21. I understand and agree that my consent under this form will supersede/override all of my previous withdrawal(s) of consent (if any) for the sharing of my Personal Information by the Government and/or Participating Agencies, statutory boards, voluntary welfare organisations/social service agencies, public healthcare institutions, and/or community self-help groups, as the case may be.
- 22. My consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.
- 23. In the event that the consent obtained pursuant to my submission of this form is subsequently found to be false, defective or otherwise invalidated through no fault of the Government, Participating Agencies, statutory boards, voluntary welfare organisations/social service agencies, public healthcare institutions, or community self-help groups, I agree that the Government, Participating Agencies, statutory boards, voluntary welfare organisations/social service agencies, public healthcare institutions, or community self-help groups, as the case may be, shall not be liable for any collection, use, sharing or disclosure of my Personal Information that was necessary for any of the purposes in paragraphs 13, 15, 16, 17 or 18 before such falsity, defect and/or invalidation of consent was known to them.

Signature of Main Applicant		Date
For Official Use:		
HA Serial No.:	Application Receipt Date:	
Remarks:		