

**Part 1: DECLARATION OF APPLICANT OR DONEE/ DEPUTY/ CAREGIVER OF THE APPLICANT (IF THE APPLICANT LACKS MENTAL CAPACITY)**

1. I declare that I satisfy/ the Applicant satisfies the following eligibility criteria ("**Eligibility Criteria**") for the Interim Disability Assistance Programme for the Elderly ("**IDAPE**"):
  - (a) The Applicant is a Singapore Citizen residing in Singapore;
  - (b) The Applicant is born on or before 30 September 1932; or born between 1 October 1932 and 30 September 1962 (both dates inclusive) but was unable to join EldersShield due to a pre-existing disability as of 2002;
  - (c) The Applicant has been assessed by an appointed IDAPE assessor to have severe disability and requires permanent assistance with at least 3 out of 6 Activities of Daily Living (ADLs): (i) showering/bathing; (ii) dressing; (iii) eating; (iv) toileting; (v) transferring from chair to bed or vice versa; and (vi) walking or moving on level surfaces;
  - (d) The per capita household monthly income of the Applicant's household is \$2,600 or less. If the household has no income, the annual value of the property where the household resides is less than \$13,000.
2. Where I am making the application on behalf of the Applicant who lacks mental capacity, I further declare that I am:
  - (a) His/her appointed donee(s) acting under a Lasting Power of Attorney under the Mental Capacity Act (Cap. 177A); OR
  - (b) His/her deputy(s) appointed by the Court under the Mental Capacity Act (Cap. 177A) to act on behalf of the Pioneer; OR
  - (c) His/her main caregiver.
3. I understand that in order to be eligible for IDAPE, the Eligibility Criteria set out in Paragraph 1 must be satisfied. I will inform the Agency for Integrated Care ("**AIC**") immediately if I/ the Applicant no longer satisfy any of the Eligibility Criteria or I become aware that the Applicant has passed on.
4. I affirm that all the information given in this application (including all the documents enclosed) is true and accurate to the best of my knowledge, and that I have not deliberately omitted any relevant fact. I have read and understood all the terms and conditions of this application and agree to be bound by them.
5. I understand that if I am found to have provided any false or inaccurate information in this application, or if I/the Applicant no longer satisfies the Eligibility Criteria:

- (a) The application may be rejected;
  - (b) If the application for IDAPE has already been approved, payments under IDAPE may be withheld; and
  - (c) I will be obliged to refund any payments under IDAPE or any part thereof which has already been paid to me, and if I do not do so, legal action may be taken against me, and I will be liable for all expenses incurred in this regard.
6. I authorize AIC to make payment under IDAPE into the Nominated Bank Account.
7. I will fully indemnify AIC and the Government of the Republic of Singapore against any loss, damage, cost and expense whatsoever, including any legal cost on a full indemnity basis, which may be incurred by AIC and the Government of the Republic of Singapore as a result of any false or inaccurate information given by me or my failure to comply with my obligations.
8. I agree that AIC and the Government of the Republic of Singapore will not be held liable for any matter arising from this application. The application is based on the information provided. In the event of any changes, a fresh application will have to be resubmitted.
9. I agree to abide by AIC's decision regarding this application, which shall be final.

## Part 2: CONSENT FOR DISCLOSURE AND USE OF PERSONAL INFORMATION

(To be provided by the Applicant/ Donee(s)/ Deputy(s)/ Caregiver of the Applicant, if the Applicant lacks mental capacity)

### Definitions

1. Throughout this Part 2, the words and expressions below shall have the meanings hereby ascribed to them.
- 1.1 **“Cooperating Parties”** shall refer to the Government of the Republic of Singapore (the **“Government”**), and participating statutory boards and organisations approved by the Government, including the Agency for Integrated Care (**“AIC”**) that are involved in or assisting in the provision and delivery of the Services and Schemes.
- 1.2 **“Personal Information”** means an individual's personal data (e.g. name, NRIC No, address, age, gender, family/household structure), financial data (e.g. income, savings, insurance coverage), consumption data (e.g. payment for utilities, housing, healthcare bills, scheme participation), social assistance data (e.g. social assistance history, assessments for eligibility and suitability for various Services and Schemes, social worker case reports) or medical information, that is relevant for the Purpose (as defined in Paragraph 3 below).

1.3 “**Services and Schemes**” means social services and public assistance schemes, which includes IDAPE as well as:

- (a) any healthcare, aged care, childcare, education, social assistance and counselling services and schemes;
- (b) any form of financial assistance such as subsidies, grants, tax reliefs, vouchers or bursaries;
- (c) retirement, savings and insurance schemes operated by Government, CPF Board or their appointed agents; and
- (d) CPF schemes such as Medisave and Medishield.

### **Consent**

2. I/ The Applicant understand that the sharing of personal information between different entities such as the Government, and certain participating statutory boards and organisations approved by the Government will assist in the evaluation of my / the Applicant’s suitability and eligibility for the Services and Schemes.

3. I/ The Applicant agree that any Cooperating Party may:

- (a) collect my/ the Applicant’s Personal Information from me or any of the other Cooperating Parties;
- (b) disclose my/ the Applicant’s Personal Information to any of the other Cooperating Parties; and
- (c) use my/ the Applicant’s Personal Information,

regardless of whether my/ the Applicant’s Personal Information relates to matters occurring before, on or after the date of this consent, for the purposes of:

- (i) evaluating my/ the Applicant’s suitability and eligibility for the Services and Schemes at any time;
- (ii) the administration and provision of the Services and Schemes in relation to me/ the Applicant; and
- (iii) data analysis, evaluation and policy formulation, in which I/ the Applicant shall not be identified as specific individuals or households (collectively known as the “**Purposes**”).

4. I/ The Applicant consent to AIC obtaining the Applicant’s medical information from any healthcare professional who is providing or has provided medical care, treatment to, or has medically assessed the Applicant.

5. This consent shall be governed by and construed in accordance with the laws of

the Republic of Singapore.

### **Part 3: UNDERTAKING & INDEMNITY**

**(To be undertaken by the nominated bank account holder who is not the Applicant)**

1. I/We declare that I/we am/are the account holder(s) of the Nominated Bank Account.
2. I/We declare that I am/we are the donee(s)/ deputy(s)/ main caregiver of the Applicant.
3. I/We understand that to be eligible to receive payments under “IDAPE, the Applicant has to satisfy all of the Eligibility Criteria at paragraph 1 of Part 1.
4. I/We agree and undertake as follows:
  - I/We will use the IDAPE payments made to the Nominated Bank Account only for the care of the Applicant;
  - I/We will inform the AIC immediately in writing when the Applicant has passed on or ceases to satisfy the Eligibility Criteria;
  - Upon written demand by AIC, I/we will refund to AIC any IDAPE payments paid to the Nominated Bank Account when the Applicant is no longer eligible;
  - I/We will fully indemnify AIC against any loss, damage, cost and expense whatsoever, including any legal cost on a full indemnity basis which may be incurred by AIC as a result of my/our failing to abide by the terms of this Undertaking and Indemnity.

**This clause applies where the Applicant is found eligible for and accepted into the Pioneer Generation Disability Assistance Scheme (“PioneerDAS”):**

5. I/ We agree and undertake as follows:
  - I/ we will use the PioneerDAS payment made to the Nominated Bank Account only for the care of the Applicant stated in the application.
  - I/ we will inform AIC immediately in writing when the Applicant has passed on or when the Applicant ceases to satisfy the PioneerDAS Eligibility Criteria.\*
  - Upon written demand by AIC, I/ we will refund to AIC any PioneerDAS payments paid to the Nominated Bank Account when the Applicant is no longer eligible.
  - I will fully indemnify AIC and the Government of the Republic of Singapore against any loss, damage, cost and expense whatsoever, including any legal cost on a full indemnity basis which may be incurred by AIC as a result of

my failing to abide by the terms of this Undertaking and Indemnity.

\*Eligibility Criteria for the Pioneer Generation Disability Assistance Scheme ("PioneerDAS") is as follows:

- The Pioneer is born on or before 31 December 1949;
- The Pioneer is a citizen of Singapore on or before 31 December 1986, and remains a Singapore citizen;
- The Pioneer continues to stay in Singapore; and
- The Pioneer continues to require assistance with at least 3 out of 6 Activities of Daily Living (ADLs): (i) showering/bathing; (ii) dressing; (iii) eating; (iv) toileting; (v) transferring from chair to bed or vice versa; and (vi) walking or moving on level surfaces.