Hardship Assistance Application

Information for the applicant

This form must only be completed and signed by the property/land owners/authorised representative (rate accounts) or person responsible to pay the account or authorised representative (debtor accounts).

Please indicate which account you would like this application to apply to.*

- Rates
- Water
- Debtor

Payment Arrangement Details

Please choose your preferred arrangement and complete and relevant details below.*

- Payment plan plus lump sum payment
- Payment plan only
<table>
<thead>
<tr>
<th>Proposed payment arrangement period (length of time):*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 6 months</td>
</tr>
<tr>
<td>6 months</td>
</tr>
<tr>
<td>12 months</td>
</tr>
<tr>
<td>24 months</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Proposed Frequency for payment?*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
</tr>
<tr>
<td>Fortnightly</td>
</tr>
<tr>
<td>Monthly</td>
</tr>
</tbody>
</table>

| Proposed payment plan start date:*                  |

<table>
<thead>
<tr>
<th>Payments to be made by Direct Debit or Bpay only, please choose payment method:*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Debit</td>
</tr>
<tr>
<td>Bpay</td>
</tr>
</tbody>
</table>
Reason for hardship request

My reason for this hardship request is due to:

- Disaster (bushfire) - individual
- Disaster (bushfire) - Small Business
- COVID-19 - individual
- COVID-19 - Small Business
- Drought

What is the industry of your employment/business?

How long have you been experiencing financial hardship?

Details:

Applicant and Account Details

Full name

Full Name
Rates/Water Assessment number or Debtor number?
Found on your Rate Notice

Contact phone number

Email address

Property Address

Lot and Plan (DP/SP) number

Postal address (if different to property address)

Street

City/Suburb

State

Zip/Post Code

Country
Property Details

Current employment status*
- Full time
- Part time
- Unemployed
- Other

Do you have a current Pensioner Concession Card (PCCO or receive any pension/government benefits)?*
- YES
- NO

PCC No:*

Date of Grant:*

Other benefit type:*
Pension/Benefit Amount ($) :

Have you claimed a Pensioner Concession on any other property in this financial year?
- YES
- NO

Property address:

Indicate all categories of people living at the property:
- Self
- Spouse
- Boarders
- Children
- Other

How many children do you support?

State their ages:
### Ownership/Residency Details

**Is the property you listed in this application your:**

- Primary residential home
- Business (land owner)
- Investment property-residential
- Business (lessee)
- Vacant land

**If the property is rented:**

- Full time
- Part time

**What is your monthly rental income:**

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**Do you own an interest (either whole or partial) in any other property?**

- YES
- NO
You answered Yes to the above question, what is the property address?

Property Ownership:
- Owned by yourself
- Joint Owners

Joint Owners Name(s)?

Is financial assistance being provided on these properties?
- YES
- NO

Supporting Documents Checklist

The information below is required to be attached to this application to assist Council granting financial hardship assistance.

Please supply two (2) or more from the following list of supporting documents.

Please indicate in the following list, which supporting documents you have attached to your applications.

- Disaster (bushfire) – Individual
Copy of letter from Department of Human Services showing financial disaster recovery assistance received.

Copy of letter from your financial institution showing disaster financial assistance has been granted ie mortgage repayments.

Copies of letters from support organisations confirming your financial hardship.

Other relevant information you feel may assist your application.

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**Disaster (bushfire) – Small Business**

Copy of letter showing eligibility for the small business bushfire support grant.

Copies of letters from other utilities or mortgage provider confirming your financial hardship assistance agreement with them.

Letter from Financial Advisor/Accountant confirming your financial situation.

Other relevant information you feel may assist your application.

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**COVID-19 – Individual**

Copy of severance letter or letter confirming you have been stood down without pay.

Copy of letter advising your eligibility for JobKeeper has been granted.

Copy of letter from your financial institution showing disaster financial assistance has been granted ie mortgage repayments.

Other relevant information you feel may assist your application.
COVID-19 - Small Business*

- Copy of letter showing your business is eligible for the small business support grant.
- Copy of letter showing your business is eligible to receive the JobKeeper subsidy.
- Letter from Financial Advisor/Accountant confirming your financial situation.
- Other relevant information you feel may assist your application.

Drought*

- Copy of letter from Department of Local Land Services advising exemption from Local Land Rates for 2019/2020.
- Copies of letters from other utilities or mortgage provider confirming your financial hardship assistance agreement with them.
- Copy of letter from Dept of Primary Industries advising of any drought assistance package you are eligible for ie Loan/Subsidy/Waiver.
- Copy of letter from Financial Advisor/Accountant confirming your financial situation.
- Other relevant information you feel may assist your application.

Attach your supporting documents.*

Choose a file
Terms and Conditions:
- Council accept or renegotiate the terms of hardship assistance as per the Financial Hardship Assistance Policy
- Further communications and/or documentation may be required to finalise this arrangement.
- A formal response will be provided by Council detailing the outcome of the hardship application and/or payment arrangement.
- If the payment arrangement is not maintained and the applicant does not notify Council, the total amount outstanding becomes due and payable and will be subject to Council’s debt recovery process.
- Interest charges or late fees will apply. The cost of legal recovery will be charged to the rates/water/debtor account.
- I consent to Council conducting any necessary checks to verify the information I have provided.

Please note: your application will be deemed unsuccessful if supporting documentation is not provided.

By submitting this document, I declare that I am authorised to apply for a payment arrangement and I understand the terms and conditions and that all details entered are accurate.

Signature*  Date signed*