

Hardship Assistance Application Form

Please complete all questions carefully as the information provided will assist to process your application. The information contained in this form is confidential and will not be used for any purpose other than consideration for assistance. All questions must be answered (if applicable), if there is insufficient space please add additional paper.

Property information

This application is hereby made for consideration by Baw Baw Shire Council for rate assistance in respect of the property below in which I/we reside:		
Property Address		
Council Number <i>(if available)</i>		
Postal Address		
Full name/s	Owner 1:	
	Owner 2:	
I/we have owned the property since		
Occupation	Owner 1:	
	Owner 2:	
Telephone Numbers (home and mobile)	Owner 1:	
	Owner 2:	
Email Address	Owner 1:	
	Owner 2:	
Type of Housing (please circle)	Mortgage: Yes / No	
(piease circle)	Fully owned: Yes / No	

Assets

	Yes / No If yes provide details below (i.e	. address, valuation)
Do you own any other properties?		
	Yes / No If yes provide details below (i.e.	boat. caravan)
Do you own any other substantial assets?		
	Yes / No If yes provide details below	
Do you own a motor vehicle?	Make and model:	Value: \$
	Make and model:	Value: \$

Savings

Total of funds at Bank, Credit Union, Term Deposit	\$
Total Shares/ Investment	\$
Cash at hand	\$

Income

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Centerlink Pension, Benefit or Allowance	Please state type of income (i.e New Start) and \$ amount received fortnightly
Employment: Full time, Part time, Self employed	Please state type of employ and \$ amount received fortnightly

Fortnightly household income/dependents				
Name	Relationship	Age	Fortnightly income	Contribution
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
		Total	\$	\$

Debts

Please list all outstanding debts and amounts outstanding and/or current payment arrangement per fortnight			
Debt owed to	Debt type	Payment per fortnight	Total amount
Baw Baw Shire Council	Rates	\$	\$
	Water rates	\$	\$
	Home loan repayments	\$	\$
	Gas	\$	\$
	Electricity	\$	\$
	Credit cards	\$	\$
	Personal loans	\$	\$
	Other	\$	\$

Financial counselling

Council may require you to attend financial counselling as a condition of hardship assistance.		
Are you receiving counselling?		
Туре		
Name of Organisation		
Name of Counsellor		
Address		
Telephone Number		
Email Address		

Self help

The Consumer Action Law Centre is a not for profit provider of phone based financial counselling services. The financial counselling hotline can be reached on free call 1800 007 007. The free hotline is open from 9.30am to 4pm, Monday to Friday. The centre can also direct callers to their closest local inperson service.

A very useful resource is the Victorian Government Money Help website at www.moneyhelp.org.au

Financial Counselling Australia has developed a self-help website which provides letter templates, fact sheets, information on financial counselling services and a debt management self-help tool at www.debtselfhelp.org.au

Reasons for your application

Clearly state the reason why you wish to apply to be considered for Hardship provision under the Hardship Policy. Include details of unexpected events which have occurred which have left you in a position that you will be unable to pay your bill. (Please provide a separate sheet if the space below is insufficient).

Payment proposal

I/we propose to make payment of the amount outstanding by (choose an option)		
Paying in full by	Date:	
Making weekly payments	Amount/date commencing:	
Making fortnightly payments	Amount/date commencing:	
Making monthly payments	Amount/date commencing:	

Applicant declaration

I/we the applicant do solemnly and sincerely declare that the information contained in this application is true and correct to the best of my knowledge.

I understand that the information provided will be used in accordance with relevant legislation.

Name:	
Signed:	Date:
Name:	
Signed:	Date:

Please note: If Council becomes aware of any ratepayer or individual providing false or misleading information in order to gain assistance for which he or she would otherwise not be eligible, the agreement with Council will become null and void. Interest not charged that would otherwise been payable will be restored to full amount and legal action to recover debt may be taken.

Privacy statement: The personal information on this form is being collected by Council to enable assessment of your application. Council will use the information for this primary purpose only. You may apply to Council to gain access to, or for the amendment of personal information held by Council. Information on Council's Privacy Policies can be obtained from Council's Privacy Officer during business hours on 5624 2411.