APPLICATION FOR HARDSHIP ASSISTANCE

Property Number:				
	(Office Use Only)			
Applicant/s:				
Property Address:				
Postal Address:				
Contact Phone No. :		Mobile:		
Email Address:				
	Property Infor	mation		
	Property Infor	mation		
a) Is this property yo	Property Information principal residence?		Yes	No
a) Is this property yob) Do you own the p	our principal residence?		Yes	No
	our principal residence? property:		Yes Yes	No No
b) Do you own the p	our principal residence? property:			
b) Do you own the p a. By you b. With a	our principal residence? property: rself?		Yes	No
b) Do you own the p a. By you b. With a c. With ot	our principal residence? property: rself? spouse?		Yes Yes	No No

Review Date: June 2014

Effective Date: June 2013

Hardship Details

	/hat is the cause of the hards			

			************	***************************************
		***************************************	*************	

			***************************************	*******************************
) Ho	ow long have you been exper	iencing this hards	hip?	

Income	
Your average weekly income after tax	\$
Income of spouse/partner + income from any other source (eg. Centrelink)	\$

Y	our Employment Details	
Name of employer:		
Address of your employer:		
learner.	(Street Addre	ess)
(Locality)	(Post Code)	(State)

	A	ssets	
Assets Owned By You			Current Value
Home	Address:	· san - sana · · · · · · · · · · · · · · · · · ·	\$
Funds in Banks/Financial Institutions	Institution:		\$ \$
	Institution:		\$
	Name:		\$
Investments	Туре:		\$
	Name:		\$
	Year:	Make:	\$
	Model:	Rego №	
Motor Vehicle/s	Year:	Make: Rego №	\$
	Year:	Make:	
	Model:	Rego №	\$
Household contents	Total: (No	need to list separately)	\$
Other Personal Property	Specify:		\$
Total value of property own	ed by you (Plea	se supply supporting documentation)	\$

Average Weekly Expenses		
Item		Weekly Amount
Food		\$
Household supplies		\$
Mortgage/Rent		\$
Gas		\$
Electricity		\$
Heating fuel		\$
Telephone		\$
Motor vehicle		\$
Petrol		\$
Maintenance		\$
Fares		\$
Clothing & Shoes		\$
Medical/Hospital funds		\$
Entertainment/Hobbies		\$
Education Expenses (including fees and levies)		\$
Chemist/Pharmaceutical		\$
Visa/Mastercard		\$
Hire Purchase Payments		\$
Other Necessary Commitments (specify)		\$
Agriculture		\$
Other		\$
Total		\$
Liabilities		Weekly \$
Home Mortgage	Details:	\$
Cradit Carda	Details:	\$
Credit Cards	Details:	\$
Other Loans	Details:	\$
Other Liabilities	Details:	\$
TOTAL (Please supply supporting documentation)		\$

Additional Questions Regarding Financial Circumstances

Do you have any income, assets or liabilities not disclosed in this examination notice?
What amagazara as 44 45 45 45 45 45 45
What arrangements are you prepared to make to satisfy this debt?
vvnat arrangements are you prepared to make to satisfy this debt?

Please attach any other information that may support your application.

Effective Date: June 2013

Declaration By Applicant For Hardship Assistance

	claration conscientiously believing the same to be true, and by virtue of the provisions of the <i>Oaths Act</i> , 00.
Sw	orn Affirmed atSignature of deponent
Nar	me of witness
Add	fress of witness
Cap	pacity of witness (Justice of the peace/Solicitor/Barrister/Commissioner for affidavits/Notary public)
	d as a witness, I certify the following matters concerning the person who made this affidavit (the
1.	I saw the face of the deponent [OR, delete whichever option is inapplicable]
	I did not see the face of the deponent because the deponent was wearing a face covering, but I am satisfied that the deponent had a special justification for not removing the covering. ¹
2.	I have known the deponent for at least 12 months. [OR, delete whichever option is inapplicable]
	I have the deponent's identity using the following identification document:
	Identification document relied on (may be original or certified copy) ²
Sigr	nature of witness
¹ [Th	ne only "special justification" for not removing a face covering is a legitimate medical reason (at April 2012).]
pens	dentification documents" include current driver licence, proof of age card, Medicare card, credit card, Centrelink sion card, Veterans Affairs entitlement card, student identity card, citizenship certificate, birth certificate, passport or Oaths Regulation 2011 or JP Ruling 003 - Confirming identity for NSW statutory declarations and affidavits, footnote

<u>Penalties for False Statutory Declarations</u>
The **Oaths Amendment Act 1996** provides that if a Statutory Declaration is made to gain material benefit and the offence is dealt with by indictment the penalty is up to 7 years imprisonment. If dealt with summarily then the penalty is up to 2 years imprisonment and/or a fine of 100 penalty units (\$11,000). If the offence is swearing a false declaration that does not involve material benefit, the penalty is up to 12 months imprisonment and/or a fine of 50 penalty units (\$5,500.)

Cust	tomer Consent
l/We,	
	ment departments and other institutions information which i am eligible for hardship assistance in relation to the propert
I may revoke this Customer Consent Record at revoked.	any time by giving Council written notice that my consent i
I acknowledge I have read and understood this C	Customer Consent record.
Applicants Signature/s:	Date:
	any information requested for the purpose of assessing eligibility for a securification is required under the Local Government Act 1993 and the Local
This information is required before your application f	for a Hardship Provision – Rates and Charges assistance can be and confidential and Council must not disclose the information to any e for which the information was collected.
	nal information, contact the Council's Public Officer. The information corrected and updated by you, by contacting the Council.
Purpo	se Of This Form
This form is to be completed by Ratepayers wishin assistance as prescribed in Council's Hardship – Rates	ng to be considered for Hardship Provision – Rates and Charges s and Charges Policy.
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Privacy Statement

You will need to provide personal information to Council in respect of this application. Council is required under the Privacy & Personal Information Protection Act 1998 (PPIPA) to collect, maintain & use your personal information in accordance with the Privacy Principles & other relevant requirements of the PPIPA. For further clarification please contact Council's Public Officer.

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