FINANCIAL HARDSHIP APPLICATION FORM

Property details



Financial hardship for rate relief pursuant to Sections 3(1), 171/171A/171B of the *Local Government Act* 1989 will be considered by Council on the basis of individual merit (primary residence only).

Please be aware: This application is **not** valid for investment properties or those rated as commercial, industrial, or vacant land.

Property number							
Property address							
Owner(s) details							
Name owner 1					Date of birth		
Contact phone number		(H)	(B)		(M)		
Email address		(11)	(5)		(W)		
Occupation							
Postal address (if differe address)	nt to property						
Mailing address (If different to residential)						
Name owner 2					Date of birth		
Contact phone number		(H)	(B)		(M)		
Email address							
Occupation							
Dependants (living with y	you)	☐ Yes (if yes, provide number and age of dependants?) ☐ No No Ages: (if over 18 years, provide details of circumstance)				_	
Status		☐ Single ☐ Married ☐ De facto ☐ Widow/Widower ☐ Divorced/Separated If your spouse is not on the Title, please complete the next section					
Spouse /De facto (if not	on title)						
Pensioner		☐ Yes (if yes, what	type of pension?) type:	pe:			
Reason for Hardship Application * For example: • You became ill and can't earn an income • You lost your job • You had a family breakdown • You have unexpected expenses • Other (please describe)							



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Assets (provide dollar value and details)		Details
Property (this property)	\$	
Investment property/land	\$	
Bank deposits (Total Value incl. Banks, Building Societies & Credit Unions)	\$	
Motor vehicle(s)	\$	
Shares (total value)	\$	
Other investments	\$	

Income (total Monthly Income)			
From Salary (after tax)	\$		
From Pension type:	\$		
From Property asset (rent or board)	\$		
From Bank interest	\$		
From other investments (includes share dividends)	\$		
From Superannuation	\$		
From other sources (provide details)	\$		

Expenses (total Monthly Expense)		
Mortgage payments – including documentation *see Note on page 3	\$	
Credit cards/store cards	\$	
Annual Council rates (for all properties owned)	\$	
Water rates	\$	
Utilities (i.e., gas, electricity etc.)	\$	
Phone and internet charges	\$	
Groceries (food, alcohol etc.)	\$	
Insurance: house, car, health	\$	
Loans: personal/car	\$	
Medical expenses (doctor /specialist/pharmacy etc.)	\$	
Other (i.e., school fees, clothing, leisure etc)	\$	

Liabilities (provide the dollar value of what, if any, is owing as of today for the following)			
Mortgage (on this property)	\$		
Mortgage (investment property/land)	\$		
Balance of credit/store cards	\$		
Personal loans	\$		
Other, detail	\$		

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Declaration							
/ We have owne	ed the property since (date of	of purchase): _					
/ We acknowled	dge that by signing this docu	ıment, the infor	mation provide	d in support of	my applicatior	n is true and corre	ect.
Owner 1 sigr	nature:			Da	te:		
Owner 2 sigr	Owner 2 signature:		Date:				
NOTE: * Ple	ase provide documenta	ation to supp	ort your Har	dship Applica	ation, such a	as:	
☐ Your most	uation statement t recent tax return documentation which de	☐ All ut ☐ Pays monstrates in	 □ Bank statements for each account (savings, cheque, credit cards) □ All utility bills (water, gas, electricity, phone, internet) □ Payslips (for the last three consecutive pays-when working) nstrates income and expenditure for the property. contact you to organise a mutually convenient time and day to 				
Completed By email: By post:	d Hardship Applicated debtmanagement@m Revenue Mornington Peninsulate Private Bag 1000	ornpen.vic.go					
By hand:	ROSEBUD VIC 3939 To any Shire Office: Rosebud, Mornington, Hastings, and Somerville Library						
accordance the purpose	tion on this form is being with its Privacy Policy, the of considering hardship s	e Privacy and status.	Data Protect	ion Act 2014 a	and the Heali	th Records Act	2001 for
Shire's Priva collected and OFFICE USE	cess personal information cy Officer privacy@morn d may use it for a second	pen.vic.gov.a	<u>u</u> . The Shire urpose that co	will only use th	nis informationably expect	on for the purpo	
Officer initia	als: TL ii	nitials:		CFO initials:			_