

In accordance with Section 567 (c) of the *Local Government Act 1993*.

**APPLICATION FOR HARDSHIP RATE RELIEF FOR THE WHOLE OR PART
OF THE YEAR COMMENCING 1 JULY 2018**

PURPOSE OF THIS FORM

This form is for Council to assess ratepayers suffering genuine financial hardship.

Any rate payer suffering hardship may offer a payment arrangement to Council.

Provided that the ratepayer proves hardship to Council and the arrangement is acceptable to Council, Council will write off any interest accrued during the term of the arrangement, provided that the arrangement is kept.

**please answer all questions relevant to you using block letters and ticking appropriate boxes.*

Assessment No: _____ Property Description (Lot/Plan) _____

I, _____

(Full name in block letters)

of _____

(address)

Telephone number _____ apply for a concession on the basis of financial hardship

Email _____

Do you receive any pensions or benefits? Yes No

If Yes, please provide type of pension and amount received per fortnight

Pension: _____ Amount: _____

Do you have a current pensioner Concession Card issued by the Commonwealth Government? Yes No

PCC No: _____ Date of Grant: _____

Have you claimed a pensioner concession on any other property this year? Yes No

If yes, state the address of the other property: _____

4. Is this property your sole or principal place of living? Yes No

If yes, how long as this property been your sole/principle place of living _____

5. I am liable for payment of rates and charges on this property, together with others as listed below, if no others write 'SOLE OWNER': _____

Please provide details of all "other" persons indicated in Question 5.

(ALL OWNERS other than the applicant should be listed, including your spouse):

Name	PCC Holder Y/N	Pension No	Date of Grant	Relationship to me (eg: spouse, father, co-owner etc)	Resident of Property Y/N	% of ownership

Evidence of joint ownership is attached/has been provided to council previously (circle whichever is applicable).

6. Is the property owned as shares in a company title? Yes No

If you do not own or rent the property, please explain why you are liable to pay the rates _

7. Are there people living at the property other than those listed at Question 5?

If yes, please indicate who these people are:

Self

Spouse

Children (state ages _____)

Boarders

Relatives

Other (please specify) _____

8. Do you own (either fully or partially) any other land or buildings?

If yes – list addresses

9. How many children do you support? _____ State ages _____

10. What is the cause of financial hardship?



12. Please state gross weekly amount received in dollars and cents from the following sources of income:

- a) Household income (including Spouse) \$ _____
- b) Pensions and benefits \$ _____
- c) Compensation, superannuation insurance or retirement benefits \$ _____
- d) Income of other residents of the property \$ _____
- e) Casual/part-time employment \$ _____
- f) Family allowance \$ _____
- g) Interest from banks/credit unions/building societies \$ _____

13. Please provide name and current balance of all bank, credit union or building society accounts held by you

14. Please state details of fortnightly outgoings

Outgoing	Owed to	Amount
Rent/Home Lone		
Other mortgages		
Personal loans/Hire purchase		
Health costs		
Council rates and charges		

Please attach a separate page with any other relevant information you feel may assist your application.

I hereby declare that the information provided is true and correct. **If you make a false statement in an application you may be guilty of an offence and fined up to \$2,200.**

Signature: _____ Date: _____



IMPORTANT NOTICE

CUSTOMER CONSENT

For the sole purpose of authorising the council to confirm with Centrelink whether or not the detail I have provided to the council matches Centrelink or other Commonwealth portfolio department or agency records in relation to the current status of my Commonwealth Benefit:

I _____ (full name) authorise the council to confirm with Centrelink the following details:

- Pension No.
- Name
- Address
- Postcode, and
- That I am a valid concessional card holder

I agree that, unless I revoke my consent, this Customer Consent record is a permanent consent, and may be relied on by the council until such time as I revoke it.

I may revoke this Customer Consent record at any time by giving the council **written** notice that my consent is revoked. I understand if I revoke this consent, I may not be eligible for the concession given by the council.

I acknowledge I have read and understood this Customer Consent record. Signature:

_____ Date: _____

PRIVACY AND PERSONAL INFORMATION PROTECTION ACT 1998 Compliance with Section 10

The information contained in this application form and any information requested for the purpose of assessing eligibility for a pensioner concession is required under the Local Government Act 1993 and the Local Government (General) Regulation 2005.

This information is required before your application for a pensioner concession can be processed. The information is private and confidential and council must not disclose the information to any person or body if it is not directly related to the purpose for which the information was collected.

If you have a complaint about the use of your personal information, contact the council's Public Officer. The information contained or referred to in this application form may be corrected and updated by you, by contacting the council.

