



**PRIVATE AND CONFIDENTIAL**

## Financial Hardship Application

**Please return to:**

**Private and Confidential**  
The Chief Executive Officer  
Central Highlands Regional Council  
PO Box 21  
EMERALD QLD 4720

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**Privacy Notification (Information Privacy Act 2009)** - The personal information that Council is collecting from you on this application form is personal information for the purposes of the Information Privacy Act 2009 ('the Act'). The intended recipients of the personal information are officers within the Council and any person wishing to inspect the application in accordance with the Local Government Act 2009 or the Government Information (Public Access) Act 2009). The Central Highlands Regional Council is collecting your personal information to process your application. This information will only be disclosed to any other third party with your written authorisation or as we are required to by law.

SECTION 1 - APPLICANT	
Applicant	I / We, <span style="float: right;">(Full name/s)</span>
	of <span style="float: right;">(Address)</span>
	(Mobile) <span style="float: right;">(Telephone)</span>
	(Email)
Apply for rates and charges and water charges relief on the basis of financial hardship.	

SECTION 2 – PROPERTY DETAILS	
Assessment	Council Rates Assessment Number
Debtor	Council Debtor Account Number
Description	Property address
	The property for which I am claiming has been my sole/principal place of living since ...../...../.....

SECTION 3 – PROPERTY OWNERS	
REGISTERED OWNERS OF PROPERTY	
<b>OWNER 1</b>	Surname
	Given Name/s
	Occupation
	Age
	Marital Status
Currently a resident of property for which rate relief is being sought <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>OWNER 2</b>	Surname
	Given Name/s
	Occupation
	Age
	Marital Status
Currently a resident of property for which rate relief is being sought <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>OWNER 3</b>	Surname
	Given Name/s
	Occupation
	Age
	Marital Status
Currently a resident of property for which rate relief is being sought <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>OWNER 4</b>	Surname
	Given Name/s
	Occupation
	Age
	Marital Status
Currently a resident of property for which rate relief is being sought <input type="checkbox"/> Yes <input type="checkbox"/> No	





**SECTION 6 – SUMMARY OF FINANCIAL POSITION**

**SUMMARY OF FINANCIAL POSITION (First or Combined Applicant)**

**PROPERTY OWNERS WHO HAVE COMBINED INCOME AND EXPENSES CAN COMBINE INFORMATION**

Please note that all income, expenditure and liabilities are to be **monthly** figures.

For example: If your gross weekly income was \$500, to calculate your monthly income you would calculate:

\$500 (weekly income) x 52 (weeks per year) / 12 (months per year) = \$2,167 per month

<b>INCOME</b>		
<b>Income Received</b>	<b>Income Received From</b>	<b>Monthly Amount</b>
Wage		
Wage		
Pension and benefits		
Interest from banks / credit unions / building societies		
Compensation, superannuation insurance or retirement benefits		
Government Grants or assistance		
Other Income		
<b>Total Monthly Income:</b>		<b>\$</b>

<b>EXPENSES</b>		
	<b>Expenses Paid to</b>	<b>Monthly Amount</b>
Credit Card/s		
Electricity costs		
Gas costs		
Health costs		
Council property rates		
Council water rates		
Education		
Rent		
Insurance		
Telecommunications		
Other outgoings		
<b>Total Monthly Expenses:</b>		<b>\$</b>

**SUMMARY OF FINANCIAL POSITION - First or Combined Applicant - continued**

<b>ASSETS</b>		
<b>Asset</b>	<b>Details</b>	<b>Value</b>
Cash on Hand		
Savings or cheque accounts (e.g. bank, building society, credit union, please specify)		
Savings or cheque accounts (e.g. bank, building society, credit union, please specify)		
All properties including dwelling		
Investments (bonds, shares, etc)		
Motor vehicles		
Boat, caravan, jetski etc		
Livestock		
Other		

<b>LIABILITIES</b>				
<b>Purpose of Loan</b>	<b>Creditor</b>	<b>Current Debt</b>	<b>Arrears (if any)</b>	<b>Monthly Repayment</b>
Home loan				
Other mortgages				
Personal loan				
Hire purchase				
Motor vehicle loan				
Credit cards				
Other liabilities				
<b>Total Monthly Liability Payments:</b>				\$

**Please attach documentation to substantiate your financial position. Copies of last two Income Tax Assessments, statements from Centrelink verifying financial positions, recent pay slip/s. Current statements for all credit cards, savings or cheque accounts and loans.**

**SUMMARY OF FINANCIAL POSITION - Second Applicant (if not combined previously)**

Please note that all income, expenditure and liabilities are to be monthly figures.

For example: If your gross weekly income was \$500, to calculate your monthly income you would calculate:

$$\$500 \text{ (weekly income)} \times 52 \text{ (weeks per year)} / 12 \text{ (months per year)} = \$2,167 \text{ per month}$$

<b>INCOME</b>		
<b>Income Received</b>	<b>Income Received From</b>	<b>Monthly Amount</b>
Wage		
Wage		
Pension payment/s		
Interest dividends		
Hobby		
Government Grants or assistance		
Other Income		
<b>Total Monthly Income:</b>		<b>\$</b>

<b>EXPENSES</b>		
	<b>Expenses Paid to</b>	<b>Monthly Amount</b>
Credit Card/s		
Electricity costs		
Gas costs		
Health costs		
Council property rates		
Council water rates		
Education		
Rent		
Insurance		
Telecommunications		
Other outgoings		
<b>Total Monthly Expenses:</b>		<b>\$</b>





**SUMMARY OF FINANCIAL POSITION - Second Applicant - Continued**

<b>ASSETS</b>		
<b>Asset</b>	<b>Details</b>	<b>Value</b>
Cash on Hand		
Savings or cheque accounts (e.g. bank, building society, credit union, please specify)		
Savings or cheque accounts (e.g. bank, building society, credit union, please specify)		
All properties including dwelling		
Investments (bonds, shares, etc)		
Motor vehicles		
Boat, caravan, jetski etc		
Livestock		
Other		

<b>LIABILITIES</b>				
<b>Purpose of Loan</b>	<b>Creditor</b>	<b>Current Debt</b>	<b>Arrears (if any)</b>	<b>Monthly Repayment</b>
Home loan				
Other mortgages				
Personal loan				
Hire purchase				
Motor vehicle loan				
Credit cards				
Other liabilities				
<b>Total Monthly Liability Payments:</b>				\$

Please attach documentation to substantiate financial position. Copies of last two Income Tax Assessments, statements from Centrelink verifying financial positions, recent pay slip/s. Current statements for all credit cards, savings or cheque accounts and loans.

**SECTION 7 – CUSTOMER CONSENT (Pensioner)**

Signature	For the sole purpose of authorising the Council to confirm with Centrelink whether or not the detail I / We have provided to the Council matches Centrelink or other Commonwealth portfolio department or agency records in relation to the current status of my / our Commonwealth Benefit:	
	I / We, _____ (Full Name/s)	
	Authorise Council to confirm with Centrelink the following details: Pension Number; Name; Address; Postcode, and that I am/we are a valid concessional card holder.	
	I / We agree that, unless I / we revoke my/our consent, this Customer Consent record is a permanent consent, and may be relied on by the Council until such time as it is revoked. I/we may revoke this Customer Consent record at any time by giving the Council written notice that the consent is revoked. I / we understand if consent is revoked, I / we may not be eligible for the concession given by the Council. I / We acknowledge I / we have read and understood this Customer Consent.	
		Date:        /        /
	Date:        /        /	

SECTION 8 – STATUTORY DECLARATION

I/We \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Of \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

In the State of Queensland, do solemnly and sincerely declare all the answers to be true and correct and I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the "Oaths Act of 1867".

I hereby undertake to accept the procedures and the rulings of the Central Highlands Regional Council and that the decisions of the Central Highlands Regional Council are not subject to appeal.

TAKEN AND DECLARED

AT \_\_\_\_\_ ) \_\_\_\_\_  
 Signature

DAY OF \_\_\_\_\_ 20 \_\_\_\_ ) \_\_\_\_\_  
 Signature

BEFORE ME \_\_\_\_\_ ) \_\_\_\_\_  
 Justice of the Peace/Commissioner for Declarations Signature

This application should be forwarded to:

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 PO Box 21  
 EMERALD QLD 4720

**SECTION 9 – INFORMATION FOR APPLICANTS**

Council will accept this application if all information sought is provided by you. Additional information that you may have that supports your application should be attached ([See Checklist below](#)):

I HAVE COMPLETED:		✓
Section 1	Applicant	
Section 2	Property Details	
Section 3	Property Owners	
Section 4	Other Occupants of Property	
Section 5	Application	
Section 6	Summary of Financial Position	
Section 7	Customer Consent (Pensioner)	
Section 8	Statutory Declaration	
Attachments (if applicable)	Annual Tax Assessments (last 2 financial years)	
	Pay Slip/s	
	Centrelink Statements	
	Details of refusal of any loans or credit	
	Details of superannuation fund balances	
	Supporting information from financial counselling service	
Attachments (required)	Current Statements for Credit Cards	
	Current Statements for Savings/Cheque/Investment Accounts	
	Current Statements for Loans	

**Office Use Only**

Date Received Application Number

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