

## Hardship Rate Relief Application

LAST UPDATED 28 MARCH 2019

Date: .....

### PRIVACY NOTIFICATION

**Privacy Notification (Privacy and Personal Information Protection Act 1998 – Section 10).** The personal information that Gunnedah Shire Council is collecting from you on this application form is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 ('the Act'). The intended recipients of the personal information are officers within the Council and persons wishing to inspect the application in accordance with the Local Government Act 1993 or the Government Information (Public Access) Act 2009. The supply of information by you is not voluntary and if you cannot provide or do not wish to provide the information sought, the Council will be unable to process your application. You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such application in accordance with the legislation. Council is to be regarded as the agency that holds the information. Enquiries regarding this matter can be addressed to Council by telephoning 02 6740 2100.

### APPLICANT DETAILS

I (full name) .....

of (address) .....

Telephone: ..... Mobile: .....

Email: .....

wish to apply for rate hardship relief on the basis of financial hardship.

### PROPERTY DETAILS

Rates Account No: .....

Property Address: .....

The property for which I am claiming has been my sole/principal place of living since ..... / ..... / .....

### APPLICATION

This application is for hardship rate relief for the whole or part of the year commencing 1 July 20.....

What is the cause of financial hardship? (i.e. unemployment, illness)

.....

.....

.....

.....

How long have you been experiencing hardship? .....

### INCOME AND EXPENDITURE (PENSION OR ALLOWANCES)

Do you have a Pensioner Concession Card (PCC) issued by the Commonwealth Government?  Yes  No

If 'yes', type of pension or benefit: .....

If 'yes', PCC Number (attach a copy): .....

Date of Grant: .....

Have you claimed a Pension Concession on any other property this year in any other local government area?

Yes (Please state the address of the property)  No

.....

### INCOME AND EXPENDITURE (STATEMENT)

I am liable for the payment of rates and charges on this property, together with others as listed below:

..... (If no others, please write SOLE OWNER)

Name	PCC Holder	Pension Number	Date of Grant	Relationship	Resident	Ownership %
.....	<input type="checkbox"/> Y			.....		
.....	<input type="checkbox"/> N	.....	... / ... / ...	.....	<input type="checkbox"/> Y <input type="checkbox"/> N	.....
.....	<input type="checkbox"/> Y			.....		
.....	<input type="checkbox"/> N	.....	... / ... / ...	.....	<input type="checkbox"/> Y <input type="checkbox"/> N	.....
.....	<input type="checkbox"/> Y			.....		
.....	<input type="checkbox"/> N	.....	... / ... / ...	.....	<input type="checkbox"/> Y <input type="checkbox"/> N	.....
.....	<input type="checkbox"/> Y			.....		
.....	<input type="checkbox"/> N	.....	... / ... / ...	.....	<input type="checkbox"/> Y <input type="checkbox"/> N	.....
.....	<input type="checkbox"/> Y			.....		
.....	<input type="checkbox"/> N	.....	... / ... / ...	.....	<input type="checkbox"/> Y <input type="checkbox"/> N	.....

Do you own (either fully or partially) any other land or buildings?  Yes (Please list addresses)  No

.....

.....

How many children do you support? ..... State ages: .....

### INCOME AND EXPENDITURE (INCOME FROM ALL SOURCES)

My net weekly income received from all sources is: Total Income \$ .....

Sources of income include:

- |   |                       |
|---|-----------------------|
| 1. Wages  | Total Income \$ ..... |
| 2. Pension and benefits   | Total Income \$ ..... |
| 3. Compensation, superannuation, insurance or retirement benefits | Total Income \$ ..... |
| 4. Spouses income   | Total Income \$ ..... |
| 5. Income of other residents of the property                      | Total Income \$ ..... |
| 6. Casual/Part-time employment                                    | Total Income \$ ..... |
| 7. Family Allowance   | Total Income \$ ..... |
| 8. Interest from Banks, Credit Unions, Building Societies         | Total Income \$ ..... |
| 9. Other  | Total Income \$ ..... |

### INCOME AND EXPENDITURE

Total savings held in Bank, Credit Union or Building Society: Total Savings \$ .....

Please state details of outgoings:  Weekly  Fortnightly  Monthly

Outgoings	Owed To	Amount
Rent/Home Loan	.....	\$ .....
Other Mortgages	.....	\$ .....
Personal Loans/Hire Purchase	.....	\$ .....
Credit Cards	.....	\$ .....
Electricity Costs	.....	\$ .....
Gas Costs	.....	\$ .....
Health Costs	.....	\$ .....
Water/Rates	.....	\$ .....
Other Outgoings (specify)	.....	\$ .....

Income Less Expenditure Total Income: \$ .....

Less Total Expenditure: \$ .....

Total: \$ .....

### SUPPORTING DOCUMENTATION

To enable Gunnedah Shire Council to assess your claim, please provide a copy of your latest three (3) payslips together with two (2) of the following;

- |   |  |
|---|--|
| <input type="checkbox"/> Bank, Credit Union or Building Society Statement/s | <input type="checkbox"/> Credit Card Statement/s |
| <input type="checkbox"/> Child Support Statement                            | <input type="checkbox"/> Centrelink Statement    |
| <input type="checkbox"/> Current Notice of Tax Return                       |  |

*Please include any other documentation you feel may assist with the assessment of your application.*

### CUSTOMER CONSENT (PENSIONER)

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 Council to confirm with Centrelink the following details: Pension Number, 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 Gunnedah Shire 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.

Signature: ..... Date: .....

### DECLARATION

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: .....

### 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 can be attached (see checklist below). I have completed:

- |                                |                          |                              |                          |
|--------------------------------|--------------------------|------------------------------|--------------------------|
| Applicant                      | <input type="checkbox"/> | Supporting Documentation     | <input type="checkbox"/> |
| Property Details               | <input type="checkbox"/> | Customer Consent (Pensioner) | <input type="checkbox"/> |
| Application                    | <input type="checkbox"/> | Declaration                  | <input type="checkbox"/> |
| Income and Expenditure         | <input type="checkbox"/> | Information for Applicants   | <input type="checkbox"/> |
| Pension or Allowance Statement | <input type="checkbox"/> |                              |                          |
| Income from all sources        | <input type="checkbox"/> |                              |                          |
| Pay advice                     | <input type="checkbox"/> |                              |                          |
| Savings                        | <input type="checkbox"/> |                              |                          |
| Expenditure                    | <input type="checkbox"/> |                              |                          |
| Income less Expenditure        | <input type="checkbox"/> |                              |                          |