

Rates Hardship Application

Applying for Financial Hardship Assistance

All applications will be assessed in accordance with the Central Coast Council's Financial Hardship Assistance Model Policy. A copy of the Policy is available on the Council's website http://www.centralcoast.tas.gov.au/wp-content/uploads/2020/06/Financial-Hardship-Assistance-Policy.pdf.

To seek financial hardship assistance from the Council, an application must be made in writing, addressed to the General Manager, and be submitted as follows:

. Email: <u>admin@centralcoast.tas.gov.au</u> or

. Post: Central Coast Council

PO Box 220

ULVERSTONE TAS 7315

The Central Coast Council offers flexible payment arrangements. Please contact the Rates Officer by phone on (03) 6429 8900 or email rates@centralcoast.tas.gov.au for further details if you think this option might assist you.



APPLICANT/S DETAILS					
Given Names:					
Surname:					
Postal Address:					
Suburb:					
State:					
Postcode:					
Contact Phone Number:					
Email Address:					
PROPERTY DETAILS					
Property No (as appears on your rates noti	ce):				
Property ID (as appears on your rates notice	ce):				
Name on the rates notice (as appears on y	our rates notice)	:			
Property Address:					
Are you the owner of the property:	Yes	No			
For what type of property are you applying: Residential Commercial					
Is the property a rental property:	Yes	No			

ASSISTANCE BEING SOUGHT

Please select one of the following options:

Postponing rate payments (a deferral arrangement)

Remitting rates in part or in full



DEMONSTRATION OF FINANCIAL HARDSHIP

Applicants must be able to provide evidence for financial hardship and their circumstances. As much supporting documentation as possible should be provided with this application.

Factors for Financial Hardship

Please indicate the factors that have contributed to or triggered serious financial hardship:

Loss of employment of the property owner, family member or household primary income earner:

Serious illness, including physical incapacity, hospitalisation, or mental illness of the property owner or family member;

A natural disaster;

A public health emergency or declared state of emergency;

Family tragedy;

Family breakdown;

Financial misfortune;

Other serious or complicating circumstances (please specify).

Further information to support your application:



Evidence of financial hardship

Please indicate what evidence is being provided to support your application. (More than one option can be selected).

Assessment by an independent accredited financial counsellor demonstrating an inability to pay rates

A statutory declaration from an appropriate and independent professional, familiar with the applicant/s circumstances

Pending disconnection of essential services, like water, electricity, gas (does not include mobile phone or internet bills)

Notice of impending legal action

Letter from charitable organisation regarding loss of employment

Bank notice, e.g. overdraft call or mortgaged property repossession

Employer notice of redundancy or termination of employment

Overdue medical bills

Letter from doctor verifying the inability to earn an income due to illness or caring for a sick family member

Final notice from school regarding payment of mandatory fees

Funeral expenses

Repossession notice of essential items, like a car or motorcycle

Other (please specify)

Please attach supporting evidence (list below)



TERMS AND CONDITIONS

Personal Information Protection Statement

The Council is collecting personal information from you for the purposes of managing, assessing, advising upon and determining the relevant application.

All information is collected in accordance with the Central Coast Council's Privacy Policy, available at: https://www.centralcoast.tas.gov.au/privacy/

Declaration and signature

I confirm that the information provided within this Application for Financial Hardship is accurate, and there have been no misrepresentations or omissions of fact that would otherwise influence the review and decision of Central Coast Council.

Signature		
Name		
Date		