

Financial Hardship Form

Financial hardship payment plans support ratepayers experiencing significant financial difficulties. Supporting documentation is required for applications to be fairly assessed.

Need help?

Contact Revenue Services on 1300 88 22 33 if you need assistance completing this form.

Property details			
Assessment number			
Property address			
Investment property	YES / NO	Do you own other properties?	YES / NO

Ratepayer details			
Full name			
Email		Phone	
Postal address			
Dependants (living with you)	YES / NO	Ages	
Status	SINGLE / MARRIED / DE FACTO / WIDOW- WIDOWER		
Spouse/ De Facto Full name			
Address			
Please ensure this form covers financial details of any married or de facto.			
Pension/ Concession	YES / NO	Type	

Select one option

Financial hardship payment plan		Proposed start date	/ /20
Proposed amount	\$	Proposed frequency (circle one)	Weekly Fortnightly Monthly

Financial hardship rate deferral		Proposed start date	/ /20
Amount	\$	Proposed due date	/ /20

Deferrals will be offered to eligible applicants for a maximum of 12 months.

Financial hardship rate waiver

In situations where extreme financial hardship has been established, Council may consider the waiving of rates on a case-by-case basis.

Income (annual total)

	\$ Amount	Detail
Salary/wage	\$	
Pension	\$	
Property (rent or board)	\$	
Other	\$	

Other debt

	\$ Amount	Detail
Mortgage/s	\$	
Credit/store Cards	\$	
Personal loans	\$	
Bills	\$	
Other	\$ \$ \$ \$	

Supporting documents

REQUIRED FIELD

Please provide bank statements for all accounts held by the owners.

Attach any other documents that support your application, such as proof of employment, medical records, Centrelink statements, or recommendations from a financial counsellor.

Reason

Please state your reason/s for applying and include all supporting information.

Declaration (tick all relevant boxes)

<input type="checkbox"/>	I/ we understand that under 171A of the 1989 Local Government Act, A person who— <ul style="list-style-type: none">• gives false or misleading information to the Council, or• doesn't tell the Council about any important changes to your situation could be fined up to 10 penalty units, which is approximately \$1,850.00.		
<input type="checkbox"/>	I/we declare that all information provided is true and correct and agree to contact council if: <ul style="list-style-type: none">• My/our financial situation significantly changes• I/we cannot make the agreed to payments		
	<p>Privacy Declaration</p> <p><i>Maroondah City Council is committed to protecting your privacy as prescribed by the Privacy & Data Protection Act 2014 and the Health Records Act 2001. The information you provide on this form is being collected by Maroondah City Council for the strict purpose of conducting Council business. Your information will not be disclosed to any external party without your consent unless Council is required or authorised to do so by law. Failure to provide the information requested may make you ineligible to receive the service or be part of an event/function that is the subject of this form. You have the right to access this information and amend this information by contacting Council's Privacy Officer & Health Records Officer on 1300 88 22 33 or email - privacy@maroondah.vic.gov.au.</i></p>		
<input type="checkbox"/>	I agree to the above privacy act and copyright standards.		
<input type="checkbox"/>	I have read Maroondah City Council's Rate Collection and Financial Hardship Policy		
Signature		Date	

Email application to maroondah@maroondah.vic.gov.au or post to PO Box 156 Ringwood VIC 3134.