



Lismore City Council

RATES & CHARGES HARDSHIP APPLICATION FORM

PURPOSE OF THIS FORM

This form is to be completed by ratepayers applying for a concession on Land Rates and Charges/Water Charges relating to:-

- | | Please tick |
|---|------------------------------|
| 1. Payment Arrangements - Write off Future Interest Charges, or | <input type="checkbox"/> Yes |
| 2. Write off Accrued Interest Charges, or | <input type="checkbox"/> Yes |
| 3. Extension of Pension Concession, or | <input type="checkbox"/> Yes |
| 4. Reductions for Eligible Pensioner, or | <input type="checkbox"/> Yes |
| 5. Hardship resulting from a General Revaluation | <input type="checkbox"/> Yes |

Generally, concessions may be granted to ratepayers suffering genuine financial hardship in certain circumstances. **To be considered the property must be your principal place of residence and be rated under a Residential rating category (Farmland and Business rated properties are excluded).**

The information provided on this form will assist Council in determining your eligibility for a concession, and to assess the level of that concession. Please answer all questions relevant to you and tick the appropriate boxes.

If you need any more information or assistance, please contact Council's Customer Contact Centre on telephone 02 6625 0500, Monday to Friday between 8.30am and 4.30pm, or refer to Council's policy '1.5.11 - Rates & Charges Hardship' at Council's website www.lismore.nsw.gov.au.

Assessment No. _____

I, _____ (Full name in block letters)

of, _____ (Address)

apply for a concession on the basis of financial hardship.

My telephone number is _____

Property Description (Lot/Plan) _____

(1) Have you read Council's Rates & Charges Hardship Policy? Yes No

(2) Do you receive any pension or benefits (Pensioner Concession Card or Gold Card issued by the Commonwealth Government) ? Yes No

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

Pension: _____ Amount: _____

(3) 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 (Continue) No (Not Eligible)

This property has been my sole/principal place of living since _____

(5) I am liable for the 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: e.g. spouse, mother, father, co-owner, etc	Resident of Property Y/N	% of ownership

Please provide evidence of joint ownership.

(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 6? Yes No

(8) Please indicate who is living at the property?

- Self Yes
- Spouse Yes
- Children Yes (Ages _____)
- Boarders Yes (Number _____)
- Relatives Yes (Number _____)
- Other Yes (Specify number and arrangement _____)

(9) Do you own (either fully or partially) any other properties? Yes No

If Yes, list addresses:-

(10) How many children do you support? _____ State ages _____

(11) What is the cause of the financial hardship that resulted in you preparing this application?

(12) How long have you been experiencing hardship? _____

(13) Please state gross **fortnightly** amounts received, rounded to the nearest dollar, from the following sources of income:

- a) Full-time, part-time or casual employment \$ _____
- b) Pensions and benefits \$ _____
- c) Compensation, superannuation insurance or retirement benefits \$ _____
- d) Spouse's income \$ _____
- e) Income of other residents of the property \$ _____
- f) Family allowance \$ _____
- g) Interest from banks/credit unions/building societies \$ _____
- h) Any other income source \$ _____

(14) Please provide name and current balance of all bank, credit union or building society accounts held by you:-

(15) Please state details, rounded to the nearest dollar, of **fortnightly** outgoings:-

<u>Outgoings</u>	<u>Owed To</u>	<u>Amount</u>
Home Loan/Rent		
Other mortgages		
Personal loan/Hire purchase		
Health Costs		
Council Land Rates		
Council Water		
Electricity		
Telephone		
Other (please specify)		

(16) The intention of the Hardship Policy is to offer a concession which will, combined with an agreed payment arrangement, allow the outstanding debt to be paid over a reasonable period. Please consider your circumstances and suggest a minimum amount per week, fortnight or month that you know you can afford on an ongoing basis.

Amount: \$ _____ Frequency (weekly/fortnightly/monthly) _____

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

I hereby declare that the information provided is true and correct.

Signature: _____ Date: _____

Completed forms can be either:

1. mailed:

The General Manger
Lismore City Council
PO Box 23A
LISMORE NSW 2480

2. emailed to:

council@lismore.nsw.gov.au

PRIVACY AND PERSONAL INFORMATION PROTECTION ACT 1998

Compliance with Section 10

This information is required before your application for a 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 on 1300 87 83 87. The information contained or referred to in this application form may be corrected and updated by you, by contacting Council.