

Please answer all questions relevant to you using block letters and circling Yes or No

l,	(Full na	me)	
Of	(Addre	ss)	
Apply	for the f	ollowing concession(s) on the basis on financial hardship (pleas	e select at least one)
Y	ES / NO	Deferral of the payment of Rates and Charges (extension of tir	me to pay)
Y	ES / NO	Deferral of the payment of part of the Rates and Charges (exte	ension of time to pay)
Y	ES / NO	Waiver of Rates and Charges in full	
Y	ES / NO	Waiver of Rates and Charges in part	
Y	es / No	Waiver of interest, penalties and / or legal charges invoiced in part or in-full	n respect of a Rates bill,
(1)	Propert	y ID number as stated on the issued Rates Notice:	
(2)	ls this y	our sole or principal place of residence?	YES / NO
(3)	Are you liable for the payment of rates and charges on this property?		YES / NO
(4)	(4) Do you receive any pensions or other government benefits? YES / NO If Yes, please provide type of pension or benefit and amount received per fortnight		YES / NO
		n / Benefit Type: t received per fortnight:	
year?		ou claimed a pensioner concession on any other property this please state the address of the property:	YES / NO



FINANCIAL INFORMATION

Income (weekly unless otherwise stated)

	Your average income after tax from salary or wages	\$	
	Government benefits / pension (including family payments etc)	\$	
	All other income (eg self employed income, interest, dividends)	\$	
Em	ployment Details		
	Name of your employer: (optional)		
	Address of your employer: (optional)		
Ass	ets		
	Home Property Address:		
	Current Value:	\$	
	Amount owed to bank or financial institution for this property?	\$	
	Other Property Property Address:		
	Current Value:	\$	
	Amount owed to bank or financial institution for this property?	\$	
	Funds in Banks / Financial Institutions:	\$	
	Motor Vehicles	\$	
	Other Personal Assets (shares / superannuation etc)	\$	



Expenses

Average Weekly Expenses

ltem	Weekly Amount		
Food	\$		
Household	\$		
Mortgage / Rent	\$		
Gas	\$		
Electricity	\$		
Rates / Levies	\$		
Telephone	\$		
Motor Vehicle	\$		
Petrol	\$		
Maintenance	\$		
Medical / Hospital	\$		
Other Insurance	\$		
Fares	\$		
Credit Cards	\$		
Education / Childcare	\$		
Other Necessary Commitments	\$		
TOTAL WEEKLY EXPENSES	\$		

Amounts You Owe

Name of bank/institution				

TOTAL	
Other Liabilities (specify)	
Other Loans	
Home Loan	

Does anyone contribute to paying these liabilities (e.g.: your spouse / partner)? YES / NO

If yes amount of contribution:

\$

\$



What arrangements if any are you prepared to make to pay off the amount you currently owe to Council (if any)?

Additional information you would like to add to this application

By signing I authorise Glenorchy City Council to update my details listed within this form.

Signature

Date

Contact Telephone Number

Please return completed from to Council by email to (<u>gccmail@gcc.tas.gov.au</u>) or in person to our Customer Services Staff at Council's chambers. Council will staff will contact you once your application has been received to advise how long the application process will take and if there is any additional information required.

PRIVACY NOTICE:

Council collects personal information to carry out its operations as a Tasmanian Local Government. This personal information may be used for other purposes permitted by law. The information may be shared with contractors and agents of the Council for this purpose, law enforcement agencies, courts and other organisations.

You do not have to provide your personal information but if full information is not provided the Council may be unable to action your application or request.

You can find out more about how the Council manages personal information and how you can request access or corrections to it in the Council's Privacy Policy available on the Council website or on request.