



Kerb & Gutter Accounts Hardship Relief Application

Finance & Corporate Services

City Administrative Centre Bridge Road, Nowra, NSW, Australia, 2541

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1 Applicant

Account No:

Given Name:

Surname:

Postal Address:

Suburb: Postcode:

Phone: Mobile:

Business:

Email:

2 Property Details (Place of Works)

Address:

Suburb: Postcode:

Lot: DP:

Do you own the property:

☐ By yourself

☐ With another person/s

Are there other people living at the property other than those listed as owners

How long have you owned this property?:

What is the market value of the property:

3 Other Property Details

Do you have an interest in any other properties: (please provide details:

Important Information

Council has the option of deferring payments for Kerb & Gutter accounts under the Local Government Act 1993. The following are factors, grounds and reasons for this to occur:

1. Payment of such accounts in full is made difficult .. because of reasons beyond the ratepayers control.
2. Payment of such accounts in full would cause the . person hardship.
3. The property concerned is the applicants primary . place of residence.
4. The completion in full of this application form.
5. Provision of proof of income/expenses.
6. Suitable arrangements for regular payments are made on the account.

Industrial or commercial property will not normally be considered.

You should ensure you contact Council promptly if your circumstances change. This will ensure that Council does not take action to recover the amount outstanding if you do not adhere to the arrangement. Additionally you may not be entitled to relief under the new circumstances.

4 Primary Property Details

Are you currently employed? ☐ Yes ☐ No

If yes, is your employment:

☐ Full time ☐ Part time ☐ Casual

How many hours a week do you work:

Name of your employer:

Do you receive a pension or benefit ☐ Yes ☐ No

Type of pension or benefit?:

What is your card number & expiry date:

Do you hold a health Care Card: ☐ Yes ☐ No

How many children do you support:

Please state their ages:

Shoalhaven City Council, for Hardship Relief purposes, is collecting the information requested on this form. The information will be used solely by Council officials for the purpose mentioned or a directly related purpose. The applicant understands that this information is provided on a voluntary basis and they may apply to Council for access or amendment of the information at any time.

OFFICE USE ONLY

TRIM number	Application - Hardship Relief - Kerb & Gutter	Accounts Revenue Supervisor
Form Number: 786	Version Number 1	Issue Date: 20/12/2011
		Next Review date: 20/12/2015

5 Weekly Income Details

Wages / salary after tax	\$	p/w
Pension / Benefit	\$	p/w
Income (spouse/other)	\$	p/w
Pension / Benefit (spouse/other)	\$	p/w
Child support received	\$	p/w
Family Allowance	\$	p/w
Rent/ board	\$	p/w
Other (provide details)	\$	p/w

Total \$ p/w

6 Weekly Regular Expenses

Mortgage repayments	\$	p/w
Rent/board	\$	p/w
Food	\$	p/w
Electricity/Gas	\$	p/w
Phone/s	\$	p/w
Insurance policies	\$	p/w
Council Rates & Water	\$	p/w
Vehicle exp. including petrol	\$	p/w
Child support	\$	p/w
Credit Card Payments	\$	p/w
Other (provide details)	\$	p/w

Total \$ p/w

7 Bank/Building Society Accounts

Name of Bank or Branch	Balance
	\$
	\$
	\$
	\$
Total	\$

8 Debits/Liabilities

Owing to:

\$ p/w

Balance \$

Owing to:

\$ p/w

Balance \$

Owing to:

\$ p/w

Balance \$

9 Income/Expense Totals

+ Income total (5) Total	\$ p/w
+ Bank Accounts (7) Total	\$ p/w
Less Regular Expenses (6) Total	\$ p/w
Less Debts / Liabilities (8) Total	\$ p/w
Surplus/Deficit	\$ p/w

10 Circumstances

Please provide details of reasons or circumstances that have led you to make this application: (Please attach separate sheet if required.)

11 Hardship Arrangement

I/We wish to apply to make payment of \$ per week / fortnight / month toward reduction of the outstanding account.

Declared at on / /

Before
(Justice of the Peace)

(Signature of Applicant)