

Jerberra Payment Relief Policy

Policy Number: POL16/187 • **Adopted:** 21/7/2015 • **Amended:** 15/08/2017 • **Minute Number:** D15/211162, MIN17.701 • **File:** 31944E • **Produced By:** Finance Corporate & Community Services Group • **Review Date:** 1/12/2020

1. PURPOSE

Shoalhaven City Council recognises the fact that the introduction in July 2015 of a Special Rate for Roads and Electricity Infrastructure works within Jerberra Estate based on a 10 year loan may place financial hardship on landowners in the Estate. This policy provides a mechanism for Jerberra Estate landowners in hardship circumstances to receive some financial relief, while minimising any financial impacts on Council.

2. STATEMENT

This policy only applies to Jerberra Estate landowners as at 1 July 2015. The criteria set out below are a guideline for determining when to consider requests made under this policy.

3. PROVISIONS

Rates and charges are issued by 31 July each year and are payable in four instalments on 31 August, 30 November, 28 February and 31 May. A rate notice is issued no less than 30 days before each instalment is due.

Within seven (7) days after the due date, any ratepayer who has outstanding rates and charges to the value of \$100 or more will be sent a reminder letter on Council letterhead from Council's Debt Recovery Agency. If payment is not received or a satisfactory arrangement is not made, then all accounts with an outstanding balance exceeding the greater of \$600 or one (1) instalment overdue will be referred to Council's Debt Recovery Agency for further action.

This policy will be implemented under the following conditions:

- The provisions within this policy are only available for the special rates for roads and/or electricity infrastructure which commenced on 1 July 2015.
- If a landowner is unable to pay rates and charges by the due date and unable to make arrangements to pay in full by the end of the financial year, they should contact the Rates Department for consideration of their circumstances for this policy to be implemented.
- The landowner will be asked to submit a confidential statement as evidence that payment in full would cause hardship.

- This confidential statement must be on Council’s prescribed form (contained in the Hardship Policy) and must be signed as a Statutory Declaration of the person’s circumstances.
- Evidence of hardship must also be supplied in the form of Social Security Information, tax returns or Workers Compensation Details, etc.

Payment relief will only be considered if ALL of the above criteria are met.

Council’s Hardship Committee will review all new applications and make an assessment on a case by case basis. Those eligible ratepayers who met the requirements of the previous year’s hardship approval and have agreed to the revised amount for the current rating year may have their application approved by the Debt Recovery Officer, in consultation with the Revenue Management Supervisor.

Subject to the above, a ratepayer may enter into an arrangement to repay rates and charges with Council or with Council’s Debt Recovery Agency, provided the arrangement will repay rates at the repayment amounts set by the equivalent of a 20 year loan within twelve (12) months.

Interest charges will be applied to any balance outstanding once the due date for instalments has passed. Landowners need to be aware that the repayment plan will be based on a 20 year loan. If payments are maintained at this level, interest will only be applied at 50% of the statutory rate set by IPART each year for overdue rates and charges. If interest is raised throughout the year but the annual rates are paid in full within the 12 month period, then the interest raised will be abandoned at the end of the financial year.

4. IMPLEMENTATION

The responsibility for the implementation and review of this policy shall be with the Director of Finance Corporate & Community Services.

5. REVIEW

The Finance Corporate & Community Services Group will review this policy:

- Within 12 months of the date of the election of every new Council
- Every four years; or
- As directed by Council; or
- As a result of a review in legislation that affects this policy; or

6. APPLICATION OF ESD PRINCIPLES

Non Applicable

7. RELATED POLICIES

- Revenue - Pensioner Rates and Charges – Arrears and Interest
- Revenue – Overdue Interest Rate
- Rates and Other Monies – Delegation of Authority to Write Off

- Revenue Hardship Policy
- Small Lot Rural Subdivisions – Dealing with Unpaid Rates and Charges

**Shoalhaven City Council
HARDSHIP RATE RELIEF APPLICATION FORM
JERBERRA SPECIAL RATES**

Section 567 (c) Local Government Act 1993.

All sections/questions must be answered/completed

Shoalhaven City Council recognises the fact that the introduction in July 2015 of a Special Rate for Roads & Electricity Infrastructure works within Jerberra Estate based on a 10 year loan may place financial hardship on landowners in the Estate. The Jerberra Payment Relief Policy provides a mechanism for Jerberra Estate landowners in hardship circumstances to receive some financial relief. Council will extend the payment period from ten (10) years to twenty (20) years. The ratepayer may enter into an arrangement to repay the rates and charges with Council, provided the arrangement will repay the total rates by 30 June each year. Provided the payments are strictly maintained for the period specified one half of the interest raised during that rating period will be waived.

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 completion in full of this application form
4. Provision of proof of income/expenses
5. Payments to be calculated by Council and strictly maintained for the period as specified
6. Interest will be waived at the expiration of the specified period to ensure the payments are maintained
7. Application covers the current rating period from 1 July to 30 June only. A new application is required to be lodged for each rating period. Applications will not be accepted for part of a rating year.

Privacy Notification

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 and will not be disclosed to any other parties. 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.

I/We wish to apply for Jerberra Payment Relief and will pay the amount as specified by Council by weekly / fortnightly / monthly / quarterly payments (Please circle required frequency)

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. If any information supplied is found to be false or misleading this agreement becomes null and void.

When answering the following questions please use block letters and tick the appropriate box.

Assessment Number _____

Name: _____

Address: _____

Postal Address:

Telephone:

Home:

Work:

Mobile:

Email:

Property Address:

(if different to above)

Do you own the property?

- By Yourself
- With another person/s (spouse etc)
List any other people who reside with you.
- Other - Please indicate details

Is the property:

- Residential Home
- Vacant Land
- Rural Land
- Your Sole or Principal Place of Living Since:
- Other - Please indicate details

Value of House\Land

\$

Mortgage

\$

Do you have interest in any other properties?

Details including any rental collected

Are you currently employed?

- No. Go to next question

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- Full time
- Part time/casual _____ hours per week
- Name of employer _____

Do you receive a pension or benefit?

- No. Go to next question
- Yes Amount Received Per Week \$
Pension Number _____
Pension Type _____

Do you have a health benefits card?

- No. Go to next question
- Yes
Card Number _____

Do you have any dependants?

- Yes. How many and what ages? _____

Income Details

Wages/Salary after Tax	\$ _____	per week
Pension/Benefit	\$ _____	per week
Income (Spouse)	\$ _____	per week
Pension/Benefit (Spouse)	\$ _____	per week
Maintenance received	\$ _____	per week
Family Allowance	\$ _____	per week
Other (Give details)	\$ _____	per week
	\$ _____	per week
	\$ _____	per week
Total:	\$ _____	per week

Bank/Building Society Accounts

Name of Bank/Branch	Balance
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

Regular Expenses

Mortgage repayments	\$ _____	per week
Rent/Board	\$ _____	per week
Food	\$ _____	per week
Electricity	\$ _____	per week
Rates (Council & Water)	\$ _____	per week
Repayments - Total (A)	\$ _____	per week
Vehicle expenses inc petrol	\$ _____	per week
Private Medical Insurance	\$ _____	per week
Telephone	\$ _____	per week

Debts/Liabilities

(Personal loans, credit cards)

Owing To:		Balance:
_____	\$ _____ p/w	\$ _____
_____	\$ _____ p/w	\$ _____
_____	\$ _____ p/w	\$ _____
_____	\$ _____ p/w	\$ _____
_____	\$ _____ p/w	\$ _____
Total (A)	\$ _____ p/w	\$ _____

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Maintenance payments	\$ _____	per week
School expenses	\$ _____	per week
Insurance/Superannuation	\$ _____	per week
Other	\$ _____	per week
	\$ _____	per week
	\$ _____	per week
Total:	\$ _____	per week
Surplus/Deficit	\$ _____	per week

Please give details of reasons or circumstances that have led you to make this application:

The information provided by completing this form will enable Council to determine eligibility for relief and the level of relief the ratepayer is entitled to. This information is strictly confidential and will not be disclosed to any other organisation.

Statutory Declaration
OATHS ACT 1900, NSW, EIGHTH SCHEDULE

I,, do solemnly and sincerely declare that
[name of declarant]

that the information contained in this application is true and correct

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declared at: on
[place] [date]

.....
[signature of declarant]

in the presence of an authorised witness, who states:

I,, a,
[name of authorised witness] [qualification of authorised witness]
– JP number if applicable

certify the following matters concerning the making of this statutory declaration by the person who made it: *[* please cross out any text that does not apply]*

1. *I saw the face of the person *OR* *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
2. *I have known the person for at least 12 months *OR* *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was

[describe identification document relied on]

.....
[signature of authorised witness]

.....
[date]