

Shoalhaven City Mayor's Relief Fund Application for Financial Assistance

File 3926E

2019 / 2020

Trades Person/Apprentice

Eligible applicants for financial assistance are owners of tools of trade including work vehicles, affected by Currawan bushfires since 1 November 2019 within the Shoalhaven Local Government Area. Payment of claims will be subject to verification.

Please return completed form to council@shoalhaven.nsw.gov.au

1. Name of Applicant:
2. Name of affected Business:.....
3. ABN of affected Business:
4. Address of bushfire affected property where your work tools/equipment and/or vehicle/s were damaged/destroyed:
.....
5. Lot Number and DP Number (if known):
6. Rate Assessment Number (if known):
7. Was this property your ☐ Place of Residence ☐ Business ☐ other
8. Are you over 16 years of age ☐ Yes ☐ No
9. Mailing address if different to above:.....
.....
10. Email: ☐ Preferred contact method
11. Phone: ☐ Preferred contact method
12. Are you currently experiencing hardship as a direct result of the Currawan fires ☐ Yes ☐ No
13. Please give the date that the bushfires impacted your work tools/equipment/vehicle/s:
14. Briefly describe how the bushfires have impacted your ability to undertake your usual occupation/trade:
Work Tools/Equipment and/or vehicle/s: ☐ Damaged ☐ Destroyed
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Continues overleaf

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15. Please itemise the damage, losses or costs incurred (attach additional information if available):

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16. Bank details

Bank Name:..... BSB Number:
Account Number:..... Account Name:

I declare that I am the person described above, that my tools/equipment/work vehicle/s were significantly affected by the recent Currawan bushfires and that the information provided above is true and accurate:

Full name:

Signature..... Date.....

Privacy Notice: Shoalhaven City Council for Emergency Bushfire 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.

PLEASE RETURN COMPLETED APPLICATION TO:

The Chief Executive Officer, Shoalhaven City Council, PO Box 42, Nowra NSW 2041
Email: council@shoalhaven.nsw.gov.au