

# Financial Hardship Application Form

The Financial Hardship policy applies to ratepayers who are experiencing genuine financial hardship where the ratepayer is willing but unable to pay their rates due to unforeseen and unexpected events.

Please submit your completed application form together with supporting documents via one of the following:

**Email:** [info@fremantle.wa.gov.au](mailto:info@fremantle.wa.gov.au)

**In Person:** Fremantle Oval, 70 Parry Street, Fremantle

**Post:** PO Box 807, Fremantle WA 6959

## Applicant 1:

First Name \_\_\_\_\_

Surname \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## Applicant 2:

First Name \_\_\_\_\_

Surname \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Property Number:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

## Proposed Payment

Please refer to your **Annual Rates** notice for your reference number, if you have misplaced your notice please call the City on 1300 658 371 to obtain your reference number.

## Supporting Documentation

This application must be supported with the following:

- letter outlining grounds for claiming e.g. health, reduced income, job loss
- a copy of a medical certificate, an extreme financial hardship letter /income and expenditure statement from a Financial Counsellor;
- letter from Centrelink confirming your eligibility for JobSeeker, JobKeeper

By providing these documents, the applicant has authorised the City of Fremantle to reproduce this document for internal purposes only.

## Declaration

It is hereby declared that:

1. I am/We are the owner(s)/co-owner(s) of the property
2. I am/We are experiencing extreme financial hardship.
3. This application is not made on behalf of a corporation or trustee.
4. I am/We are not bankrupt or subject to a bankruptcy petition.
5. I/We will advise the City of Fremantle if there is any change to my/our financial circumstances.

Applicant 1

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant 2

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***Please note***, it is advised you give sufficient details to support your application for financial hardship.

### ***Useful links for assistance***

<https://ndh.org.au/>

<https://financialcounsellors.org/>