

## Form- Application for Rate Relief due to Hardship

Please complete this application in BLOCK LETTERS and tick or fill in boxes where applicable. If a question does not apply, please indicate 'n/a'.

**Property Owner**

**Not for Profit organisation**

Ratepayers full name/s	
Rate Assessment Number	
Property Address	

### 1. Personal Details- Enter full name/s of the registered owner/s property

Applicant 1		Date of Birth	
Title		Marital Status	
Surname		Christian Names	
Owner Occupier Status	Yes	No	(if no, refer to Policy as you may not be eligible to apply)
Pensioner	Yes	No	If yes, type of Pension and Card No
Number of Dependants			Age of Dependants
Are you employed	Yes	No	Name of Employer

**Correspondence:** Chief Executive Officer, Whitsunday Regional Council, PO Box 104, Proserpine, QLD 4800  
 P: 1300 WRC QLD (1300 972 753) F: (07) 4945 0222 E: info@whitsundayrc.qld.gov.au www.whitsundayrc.qld.gov.au

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Bowen QLD 4805

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**Collinsville**  
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**Cannonvale**  
Shop 23, Whitsunday Plaza  
Shute Harbour Road, Cannonvale QLD 4802

# Application for Rate Relief due to Hardship

## 2020/2021

Applicant 2			Date of Birth	
Title			Marital Status	
Surname			Christian Names	
Owner Occupier Status	Yes	No	(if no, refer to Policy as you may not be eligible to apply)	
Pensioner	Yes	No	If yes, type of Pension and Card No	
Number of Dependants			Age of Dependants	
Are you employed	Yes	No	Name of Employer	

<b>2. Residential Address</b>	
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<b>3. Postal Address</b>	
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#### 4. Contact Details

Home Phone		Work Phone	
Mobile #1		Mobile #2	
Email:			

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### 5. Background (additional pages may be added if space is insufficient)

Please provide a short written explanation detailing the financial hardship/s that has/have affected your ability to meet your rate commitments (i.e. decline in your income).

### 6. Not-For-Profit Organisations

*Should you be applying as a Not For Profit organisation, please disregard sections 7 & 8 and attach a copy of your current financial statements to this application form.*

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### 7. Property Owner/s – Statement of Assets and Liabilities

Assets	Amount/Value \$	Liabilities	Amount Owning \$
Real Estate (this property)	\$	← Housing Loan	\$
Real Estate (other)	\$	← Other Bank or CU Loan	\$
Real Estate (other)	\$	← Other Loan	\$
	\$	Other Loan	\$
Cash on hand	\$	Credit Card debt	\$
Bank or Credit Union Accts	\$	Credit Card debt	\$
	\$	Taxation debt	\$
Investments (e.g. bonds, shares etc.)	\$	Other (not specified above)	\$
	\$		\$
Motor vehicles, boat, caravan etc.	\$	← Other Loan	\$
	\$		\$
Other (not specified above)	\$		\$
	\$		\$
<b>Total Assets</b>	\$		\$
<b>Less Total Liabilities</b>	\$	← <b>Total Liabilities</b>	\$
<b>Net Asset position</b>	\$		

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### 8. Combined Statement of Income and Expenditure

#### Source of Income (after tax) Amount per fortnight

Salary or Wages:	\$
Centrelink	\$
Child Support	\$
Board/Rent received	\$
Other	\$
<b>① Total Net Income for fortnight</b>	<b>\$</b>

#### Living expenses – Amount per fortnight

Mortgage	\$	Food	\$
Body Corp Fees	\$	Electricity/Gas	\$
Loan repayments	\$	Mobile Phone	\$
Credit card 1	\$	Internet/Pay TV	\$
Credit card 2	\$	Car 1	\$
Child Support	\$	Car 2	\$
Other (please detail)	\$	Boat	\$
Insurance	\$	Education	\$
Car	\$	Sundry (clothes, takeaway food etc)	\$
House/contents	\$	Other (please specify)	\$
Boat	\$	<b>② Total Expenses per fortnight</b>	<b>\$</b>
Motorcycle	\$	<b>① Total Income</b>	<b>\$</b>
Lifestyle	\$	<b>Less ② Total Expenses</b>	<b>\$</b>
Other (please specify)	\$	<b>Surplus/Deficit per fortnight</b>	<b>\$</b>

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### 9. Your Proposal

I hereby make application to pay outstanding rates/water on my property by the way of:

**Rates** Weekly / Fortnightly / Monthly Instalments of: \$

If approved, payments are to commence on: Date

**Water** Weekly / Fortnightly / Monthly Instalments of: \$

If approved, payments are to commence on: Date

### 10. Purpose of you Application – What type of relief are you requesting Council to approve?

(Refer to Sections 21 & 22 of Council's Rate Relief due to Hardship Policy Corporate Services LSP\_CORP\_11)

### Previous Assistance

Have you ever applied for Rates Assistance before? Yes No

If yes, when?

What assistance was provided

### Privacy Statement

Whitsunday Regional Council is collecting your name, address, contact phone number, details of the matter that could be deemed as your personal information and signature for declaration. This information will be used for the purpose of assessing your application and ensuring that we are able to remain in contact with you regarding the status of your application. This information will only be accessed by employees, contractors and/or Councillors of the Whitsunday Regional Council. Subject to the above disclosure, your personal information will not be given to any other agency unless you have given us permission or we are authorised or required by law to do so.

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## 2020/2021

### STATUTORY DECLARATION

I/We: .....

of: .....

In the State of Queensland, do solemnly and sincerely declare all the answers to be true and correct and I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the "Oaths Act of 1867".

I hereby undertake to accept the procedures and the rulings of the Whitsunday Regional Council and that the decisions of the Whitsunday Regional Council are not subject to appeal.

#### TAKEN AND DECLARED

At: .....

DAY OF ..... Signature: .....

BEFORE ME .....

Justice of the Peace / Commissioner for Declarations

Signature: .....

This application should be forwarded to:

**The Chief Executive Officer  
Whitsunday Regional Council  
PO Box 104  
PROSERPINE QLD 4800**

Mark your envelope

**PRIVATE & CONFIDENTIAL**

Please attach written proof of your income/s, assets, liabilities, debts and other expenses for all persons listed above for example: recent pay advices, bank statements, Centrelink letters etc.

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