## Hardship Assistance



**Banking for life** 

At People's Choice, we know that life can take unexpected turns and that unplanned events can happen. As a result, it may sometimes be difficult to meet your financial obligations. How we can help you will depend on your circumstances. This form will let us know how you would like to be helped and enable us to better understand your circumstances. We will use it to assess if you are eligible for Hardship Assistance. If you would like help completing this form please contact us in branch or on **08 8124 2148.** 

If you would like a relative, friend or a financial counselling organisation to talk to us on your behalf about your account/s, you can give your authority using our Authorised Third Party form.

Before requesting Hardship Assistance, please consider obtaining independent financial, legal and taxation advice and/or contacting the National Debt Helpline for free financial counselling on **1800 007 007.** If we approve your request for Hardship Assistance, it will be reported to credit reporting bodies that you are under a financial hardship arrangement. This information will remain on your credit file for 12 months. We will also continue to report your repayment history to credit reporting bodies during any period of approved hardship, but this information will be based on whether you are meeting your amended repayment obligations under the hardship arrangement. The reason for your hardship will not be reported. For more information, visit www.creditsmart.org.au

#### **Return Details**

Please return this completed form to us as follows:

• Scan and email this form and any attachments to: cmanagementpccu@peopleschoice.com.au

#### OR

• Mail this form and any attachments to: People's Choice Credit Management Team G.P.O.Box 1942 Adelaide SA 5001

#### OR

 $\cdot$  Deliver to your local branch.

#### Account details

Account number/s:

Borrower 1 details					
Member name		Phone number			
Email address					
Please tick this box if you do not wis	sh to receive emails regarding your	hardship application.			
Occupation		Employer			
Employment type:  Full time  Pa	art time 🔲 Casual 🔲 Unempl	oyed			
Borrower 2 details					
Member name		Phone number			
Email address					
Please tick this box if you do not wis	sh to receive emails regarding your	hardship application.			
Occupation		Employer			
Employment type: IFull time IPart time Casual Unemployed					
Houshold details					
Relationship status					
Number of children/dependents					
Age of children/dependents					

#### Type of assistance (Please tick ONE)

Please let us know what Hardship Assistance you would like to apply for.

#### **Please Note:**

- · If you defer repayments, interest during the deferral will continue to be charged which will increase the total amount owing.
- · Deferred payments, still continue to accrue. If you defer repayments, you may repay more interest during the life of the loan.
- · Reduced payments still continue to accrue. If you reduce payments, you may repay more interest during the life of loan.
- Repayments after Hardship Assistance may be adjusted so you pay off your loan over the original term. This could mean repayments will increase.

#### Type A

I/we would like to defer repayments

Date you would like deferral to start:	ral to start:	
Length of time deferral is requested for:	requested	

#### Туре В

□ I/we would like to reduce repayments

Reduced repayment amount that is
affordable:
Date you would like reduced
repayment to start:
Length of time reduced repayment
is requested for:

#### Туре С

I/we would like to change repayments in another way.

If you would like to change your loan and contract in a different way, please set out how you would like to do so. Please include dates and amounts.

#### **Reason for request**

Please provide details of what has changed to make it difficult to make repayments on your loan.

For example, is it due to: changes to income or expenditure, changes to employment status, significant event such as relationship breakdown or death in the family, injury or illness, domestic or family violence or an emergency event such as a pandemic or natural disaster.

Supporting information may be requested in order to effectively assess your request for Hardship Assistance.

# **STATEMENT OF FINANCIAL POSITION**

Borrower 1 Income (Please include copy of current payslip)						
Frequency and amount (borrower 1) 🔲 Weekly 🔲 Fortnightly 🔲 Monthly						
After tax wages	\$			Total Centrelink benefits	\$	
Board or rent	\$			Child support/ Maintenance	S	
Interest/ Dividends	\$			Investments	\$	
Other income	\$			Other income	\$	
Other income	\$			Other income	\$	
Total Income					\$	
Borrower 2 Income (Please include copy of current payslip)						
		_	_	_		
Frequency and amount (bo		_	Fortnightly	_		
	rrowe	_	_	_	\$	
Frequency and amount (bo	rrowe \$	_	_			
Frequency and amount (bo After tax wages	rrowe \$	_	_	Monthly Total Centrelink benefits	\$	
Frequency and amount (bo After tax wages Board or rent	rrowe \$ \$	_	_	Monthly Total Centrelink benefits Child support/ Maintenance	\$ \$	
Frequency and amount (bo After tax wages Board or rent Interest/ Dividends	rrowe \$ \$ \$ \$	_	_	Monthly Total Centrelink benefits Child support/ Maintenance Investments	\$ \$ \$	

### Household living expenses

Frequency and amount $\Box$ Weekly	□ Fortnightly □ Monthly		
Housing		Insurance	
Rent	\$	House/ contents insurance	\$
Council rates	\$	Health insurance	\$
Water rates	\$	Car insurance	\$
House maintenance / body corp	\$	Life insurance	\$
Utilities		Loan repayment insurance	\$
Electricity	\$	Fuel & Travel Expenses	\$
Gas	\$	Registration & Vehicle Maintenance	\$
Telephone (mobile)	\$	Other Commitments	
Telephone (home)	\$	Rental maintenance/rates	\$
Internet	\$	Child support / maintenance paid	\$
Personal / Medical		Other Personal Expenses	
Food/ groceries	\$	Streaming services	\$
Entertainment	\$	Clothing	\$
Doctor	\$	Personal Care	\$
Pharmaceuticals	\$	Other	\$
Education		Other	\$
School fees	\$	Other	\$
Childcare & After School Care	\$	Other	\$
Self education	\$	Total Expenses	\$

What you own (property, superannuation, savings, household items, vehicle, shares)	
	\$
	S
	\$
	\$
	\$
	\$
	\$
	\$

#### What you owe (People's Choice Credit Union and other providers eg Council rates, After Pay, Zip Pay, Utilities, Fines)

Add details of all debts, including if you have a payment arrangement in place.

Lender	Balance owing	Contractual repayment	Arrears	Frequency	Proposed repayments
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$
				□ Weekly □ Fortnightly □ Monthly	\$

#### Authority and declaration

By submitting this form, I/ we declare that:

- I/we have had a change in circumstance that has made it difficult for me/ us to make repayments on my/our loan;
- I/ we wish to apply for Hardship Assistance and all information in this form is true and correct;
- I/ we understand People's Choice will rely on the information I/ we have provided in this application; and
- 🗖 I/ we understand that if I/we are granted Hardship Assistance, details of the assistance provided will be shared with the guarantor, where applicable.

**Member Signature** 

**Member Signature** 

#### Next steps

We will use the information you give us to assess whether you are eligible for Hardship Assistance. If we need more information we will be in touch. When our assessment is complete, we will write to you to let you know the outcome. We encourage you to keep making whatever payments you can while we are considering your request. If you have any queries about your accounts or other types of assistance that may be available, please contact us on 08 8124 2148 or cmanagementpccu@peopleschoice.com.au