HARDSHIP RELIEF FORM



Heritage understands it can sometimes be difficult to make loan repayments and we want to help you. Whether 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 whether you are eligible for Hardship Relief. If you would like help completing this form, please contact us in branch or on **1800 222 030**.

If you would like a relative, friend or a financial counselling organisation to talk to us on your behalf about your loan, you can give your authority using our <u>Addition of Party</u> form.

Before requesting Hardship Relief, please consider obtaining independent legal, financial 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 relief, 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:	Today's date:			
 Mail this form and any attachments to: Heritage Bank Hardship Team PO Box 190, Toowoomba, Qld, 4350 	PLEASE COMPLETE AND RETURN THIS FORM TO US BY:			
OR				
 Scan and email this form and any attachments to: <u>memberassist@heritage.com.au</u> 	If the Return Date above is not completed the form must be returned within 21 days.			
Account & Member details				
Account number:				
Member name/s:				
Phone number:				
Email address:				
Type of relief (Please tick ONE)				
Type of relief (Please tick ONE) Please let us know what Hardship Relief you would like to apply for	or.			
Please let us know what Hardship Relief you would like to apply fo	se which will increase the total amount owing. lardship Relief variation will be adjusted so you pay off your loan			
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Type of relief (continued)
Туре В
☐ I/we would like to reduce repayments.
Reduced repayment amount that you can afford:
Date you want reduced repayment to start:
Length of time reduced repayment is requested for:
Type C
☐ I/we would like to reduce repayments to interest only.
Date you want interest only to start:
Length of time interest only is requested for:
Type D
☐ I would like to extend the term of the loan.
Length of time you would like loan extended for:
Type E
☐ 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
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STATEMENT OF FINANCIAL POSITION

MONTHLY Income (Please include copy of current payslip)		
After tax wages (Borrower 1)	\$	
After tax wages (Borrower 2)	\$	
Total Centrelink benefits:		
Details:	\$	
Board or rent received	\$	
Child support/ Maintenance	\$	
Interest/Investments/Dividends:		
Details:	\$	
Other Income:		
Details:	\$	
Details:	\$	
Details:	\$	
Total MONTHLY Income	\$	

MONTHLY Living Expenses	;		
Housing		Insurance	
Mortgage loan repayments	\$	House/ contents insurance	\$
Rent	\$	Health insurance	\$
Council rates	\$	Car insurance	\$
Water rates	\$	Life insurance	\$
House maintenance / body corp	\$	Loan repayment insurance	\$
Utilities		Car / Travel Expenses	
Electricity	\$	Car Loan Repayments	\$
Gas	\$	Fuel & Travel Expenses	\$
Telephone (mobile)	\$	Registration & Vehicle Maintenance	\$
Telephone (home)	\$	Other Commitments	
Internet	\$	Credit card repayments	\$
Personal / Medical		Personal loans	\$
Food/ groceries	\$	Rental maintenance/rates	\$
Entertainment	\$	Child support / maintenance paid	\$
Doctor	\$	ZipPay/Afterpay	\$
Pharmaceuticals	\$	Other	\$\$
Education		Other	\$\$
School fees	\$	Other	\$
Childcare & After School Care	\$		
Self education	\$	Total MONTHLY Expenses	\$

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/hat you owe (Heritage and o	ther lenders)	
dd details of all loans, including addil	ional notes if you have a Hardship Relief ar	rangement in place with other lenders
oan name/purpose	Lender	Amount
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authority and declaration		
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	Relief and all information in this form is true	
	y on the information I/ we have provided in	
I/ we understand that if I/we are where applicable.	granted Hardship Relief, details of the relief	f provided will be shared with the guarantor,
Where oppheodic.		
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1ember Signature	Hember Signature	
lember Signature	Plember Signature	

We encourage you to keep making whatever payments you can while we are considering your request.