



TOWN OF
VICTORIA PARK



FINANCIAL HARDSHIP

APPLICATION 2020



WE'RE OPEN
VIC PARK

FINANCIAL HARDSHIP POLICY

The Town of Victoria Park (the Town) has adopted a Financial Hardship Policy as we know many in our community may be suffering financial hardship as a result of the Coronavirus (COVID-19) or other life events that impact a person's capacity to pay their Rates. We want to ensure that eligible Ratepayers can apply and be considered for assistance to meet their Rates payment responsibilities.

A successful application will result in a rates payment plan agreed between you and the Town and if there is extreme financial hardship, penalty interest may be written off or not applied to the rates debt for a period of time.

Of course, the Town expects that Ratepayers will make reasonable efforts to make payments in accordance with their agreed payment plan, but we do understand that things can change and you can contact us at any time to request an adjustment to your payment plan.

Are you eligible to apply?

Any Ratepayer experiencing difficulties in meeting their financial commitments is eligible to apply.

How is a decision made about my application?

Decisions about financial hardship applications will be assessed based on the information provided in the application form and attachments submitted. This information will be assessed against the requirements of the Town's Financial Hardship Policy. You can read the [Financial Hardship Policy](#) on our website or request a copy from our Rates Section.

After you submit an application, we will contact you if we need more information. Your application will be acknowledged within 7 working days and will be processed as soon as possible.

Do you need help to make an application?

Contact our Rates Section on (08) 9311 8111 and one of our friendly staff will be able to assist you. We can assist you over the phone, in a face to face appointment or we can connect you with other financial counselling or community support agencies to meet your needs.

Privacy and Confidentiality

We understand that the information requested in this application is sensitive and we will treat it as confidential and only use this information for making decisions regarding your rates debt.

Right to have the decision reviewed

If you are not happy with our decision about your application, you can ask for the decision to be reviewed. Decision review requests can be submitted to the Chief Executive Officer, who will consider

your request and advise you of the outcome. Email your request to admin@vicpark.wa.gov.au or mail to Locked Bag 437, Victoria Park WA 6979.

If you are still unhappy with the decision and outcome of your appeal, you can seek advice from Ombudsman WA – check the website www.ombudsman.wa.gov.au or Phone 08 9220 7555, Freecall 1800 117 000 or email mail@ombudsman.wa.gov.au



FINANCIAL HARDSHIP APPLICATION

The Town of Victoria Park (**the Town**) is committed to supporting the whole community withstand the unprecedented challenges arising from the COVID19 pandemic or other economic downturn and recognises that these challenges will result in financial hardship for our ratepayers and other debtors who receive services from the Town.

To ensure that we offer fair, equitable, consistent and dignified support to those suffering hardship, while treating all members of the community with respect and understanding at this difficult time, please consider submitting a Financial Hardship Application (**FHA**). This can be assessed at the Town's webpage or by contacting, or phone our customer service centre 08 9311 8111.

Financial hardship occurs where a person is unable to pay rates and services charges or other Town fees without affecting their ability to meet their basic living needs, or the basic living needs of their dependents. The Town recognises the likelihood that COVID19 or other an economic downturn will increase the occurrence of payment difficulties, financial hardship and vulnerability in our community.

To complete the FHA, evidence of hardship is required and debtors are encouraged to provide any information about their circumstances that may be relevant for assessment. A flexible approach will be taken to a range of individual circumstances including, but not limited to, the following situations:

- recent unemployment or under-employment
- sickness or recovery from sickness
- low income or loss of income
- unanticipated circumstances such as caring for and supporting extended family.

If the Town determines a debtor is in financial hardship, the eligible debtor will be offered a payment plan based on their application which will comprise of the following:

- an extension in time to pay
- a payment plan
- a suspension of interest charges and administration fees whilst a payment plan is in place.

Please return applications to admin@vicpark.wa.gov.au for review and assessment.

PROPERTY DETAILS	
Address	
Assessment number	
Outstanding rate balance	\$
RATING INFORMATION	
Is the property owner / occupied or is it rented?	<input type="checkbox"/> Owner/Occupied <input type="checkbox"/> Tenanted Rental <input type="checkbox"/> Untenanted Rental
If the property is rented, how is it managed?	<input type="checkbox"/> Managing Agent (agent's name)
	<input type="checkbox"/> Privately managed
If you lease the property, what type of lease do you hold?	<input type="checkbox"/> Peppercorn <input type="checkbox"/> Mining tenement <input type="checkbox"/> Commercial <input type="checkbox"/> Crown

RATE PAYER INFORMATION			
Surname/Company Name			
Given Names			
Residential Address			
Postal Address			
Email Address			
Mobile No.		Phone No.	
DEPENDENTS			
Do you have any dependents you are supporting?		<input type="checkbox"/> Spouse / Partner <input type="checkbox"/> Children (how many?) <input type="checkbox"/> Other (provide details)	
NOMINATE AN AUTHORISED AGENT			
(You can authorise another person to deal with the Town regarding your application and rates debt)			
Agency Name			
Given Names			
Address			
Email			
Mobile No.		Phone No.	
PREVIOUS RATE PAYMENT ARRANGEMENTS			
(Please tell us how you have been paying your rates in the last financial year.)			
<input type="checkbox"/> Paid in Full <input type="checkbox"/> Instalments <input type="checkbox"/> Direct debit payment arrangements <input type="checkbox"/> Other (please provide details)			
RATE CONCESSION ENTITLEMENT			
You may be entitled to a Rates concession of deferment			
Do you currently hold any of the following concession cards?		<input type="checkbox"/> Seniors card ONLY <input type="checkbox"/> WA Seniors Card and Commonwealth Health Care Card <input type="checkbox"/> Other (provide details) <input type="checkbox"/> Pensioner Concession card OR State Concession Card	
FINANCIAL HARDSHIP INFORMATION			
Please tell us about the reasons your financial circumstances have changed.			
Is your financial hardship caused by the impacts of the Coronavirus (COVID-19)? 'Yes' or 'No' won't affect your application, but will help to understand the impact of the pandemic. <input type="checkbox"/> Yes / <input type="checkbox"/> No			
Please select all applicable reasons from the list below:			
<input type="checkbox"/> Unemployed	Date employment ceased:		
<input type="checkbox"/> Temporarily stood-down	Date of stand-down:		
<input type="checkbox"/> Income has been reduced <i>Please provide details in the Financial Information section below.</i>			
<input type="checkbox"/> Unable to work due to physical or mental health diagnosis	Please attach copy of letter from medical practitioner		
<input type="checkbox"/> Unable to work due to responsibilities as a carer.			
<input type="checkbox"/> Diagnosed with Coronavirus (COVID-19) and unable to work			
<input type="checkbox"/> Unable to work due to self-isolation	Start date: End date:		
<input type="checkbox"/> Death in the family	<input type="checkbox"/> Family or domestic violence	<input type="checkbox"/> Other (Please provide details)	

CURRENT FINANCIAL INFORMATION			
Accurate financial information is important so you do not commit to an unrealistic payment plan.			
INCOME		Amount per month	
Please provide monthly Net Income			
<input type="checkbox"/>	Wages / Salary	\$	
<input type="checkbox"/>	Pension or other Government Benefit	\$	
<input type="checkbox"/>	JobKeeper	\$	
<input type="checkbox"/>	JobSeeker	\$	
<input type="checkbox"/>	Interest or earnings from banks, financial institutions or dividends	\$	
<input type="checkbox"/>	Compensation, superannuation, insurance or retirement benefits	\$	
<input type="checkbox"/>	Child Support Payments	\$	
<input type="checkbox"/>	Rental income	\$	
<input type="checkbox"/>	Other income? (Please describe)	\$	
Office Use ONLY	Calculate Total Monthly Income	\$	
Current monthly income:		\$	
Office Use ONLY	Calculate Monthly Income Reduction	\$	
EXPENSES		Amount per month	
Please provide monthly household expenditure as a total for all applicants :			
<input type="checkbox"/>	Mortgage / Home Loan	\$	
<input type="checkbox"/>	Other Mortgages / business loans	\$	
<input type="checkbox"/>	Other loans	\$	
<input type="checkbox"/>	Credit Card/s	\$	
<input type="checkbox"/>	Utilities	Power	\$
		Water	\$
		Internet	\$
		Phone/s	\$
<input type="checkbox"/>	Insurances	\$	
<input type="checkbox"/>	Food and living expenses	\$	
<input type="checkbox"/>	Motor vehicle expenses (<i>licensing, repairs, fuel</i>)	\$	
<input type="checkbox"/>	Entertainment (<i>streaming services / eating out, etc</i>)	\$	
<input type="checkbox"/>	Other expenditure? (<i>Please provide details</i>)	\$	
Office Use ONLY	Calculate Total Monthly Expenditure	\$	
SUPPORTING DOCUMENTS			
Please provide copies of documents you may have to support this application.			
<input type="checkbox"/>	Letter from financial counsellor, confirm financial hardship circumstances		
<input type="checkbox"/>	Letter from medical practitioner		
<input type="checkbox"/>	Centrelink payment evidence		

<input type="checkbox"/>	Letter from your employer / recent payslips
<input type="checkbox"/>	Letter from another agencies that has deemed you to be in financial hardship <i>i.e. your bank, superannuation fund or utility provider</i>
<input type="checkbox"/>	Statutory declaration from a professional familiar with your financial circumstances <i>i.e. family doctor, accountant</i>
<input type="checkbox"/>	Other (<i>please list</i>)

PAYMENT PROPOSAL

Please provide a payment proposal that, if approved, will be your commitment to make payments toward your rates debt. Before selecting an option below, please consider all your financial commitments so that your payment proposal will **not** limit your ability to meet basic living expenses for you and your dependents.

<input type="checkbox"/>	OPTION 1 Regular Payment Plan		
	Nominate how much you want to pay and how frequently you want to pay this amount. <u>This option is preferred</u> as it will help you to reduce your rates debt through regular payments. This option helps to avoid having to make a large single payment that may impact your ability to meet basic living expenses for you and your dependents.		
	Proposed Payment Amount:	\$	Proposed Start Date:
	Proposed Payment Frequency	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly
		<input type="checkbox"/> Bi-monthly	<input type="checkbox"/> Quarterly

<input type="checkbox"/>	OPTION 2 Defer Payment in Full	
	Nominate a date on which you will pay your rates debt in full. This option may be suitable if you are <u>temporarily</u> unable to work or <u>temporarily</u> have reduced income and you <u>know</u> when your circumstances will return to normal. <u>DO NOT select this option</u> if you are not certain that you can pay your rates debt in full on or before the nominated date, as if you fail to do so, the Town may initiate debt collection proceedings.	
	Please defer my rates debt DUE DATE to:	(<i>Write date here</i>)

DECLARATION

I declare that the information provided in this Financial Hardship Application is accurate and I will advise the Town if there is any change to my / our financial circumstances.

Signature:		Date:	
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