



Financial Hardship Application

page 1

| | |
|-------------------------|-----------------|
| Borrower | MEMBER # |
| Co- Borrower | |
| Mailing Address: | |

I/We wish to apply for assistance due to the following reason:

I/We request that Holiday Coast Credit Union assist us by:

| Type of assistance | Repayment amount \$ | Length of time assistance required |
|---|---------------------|------------------------------------|
| Reducing pmts for a period & extending the term of the loan | | |
| Reducing pmts for a period & Not extending term (catchup or use advance pmts) | | |
| Reduced repayments while we voluntarily sell security | | |
| Interest only repayments for a period of time | | |
| Capitalising Interest for a period of time | | |
| Debt Consolidation of HCCU Loans (normal HCCU Lending Guidelines will need to be met) | | |
| Temporary Overdraft | | |
| A moratorium on repayments for a period of time | | |
| Waive Loan Fees | | |
| Other: please detail (ie temporary overdraft please specify limit required) | | |

I/We have made the following arrangements with other Credit Providers:

I/We have dependants to provide for.

I/We have attached evidence to support the following detailed Income/expenses:

Please supply evidence where possible for income /expenses such as rent receipts, store accounts pay slips, centrelink letters. See points on Page 2 marked with ➡. Please also provide medical certificate where hardship is due to illness or injury.

Signed by _____ Date _____

INCOME (Per Fortnight)

| | | |
|---------------------------------|---|-----------|
| Salary / Wage (after tax) | ⇒ | \$ |
| Salary/Wage of co-borrower | ⇒ | \$ |
| Pension or Government Allowance | ⇒ | \$ |
| Child Support or other payments | | \$ |
| Other | | \$ |
| TOTAL INCOME | | \$ |

EXPENSES- Household (Per Fortnight)

| | | |
|----------------------------|---|-----------|
| Rent / Body Corporate fees | ⇒ | \$ |
| Electricity/Gas | ⇒ | \$ |
| Rates (including water) | ⇒ | \$ |
| Telephone & mobile | ⇒ | \$ |
| Internet | ⇒ | \$ |
| Pay TV | | \$ |
| Groceries | | \$ |
| Entertainment | | \$ |
| Medical | | \$ |
| Other | | \$ |
| SUB-TOTAL | | \$ |

EXPENSES - Transport (Per Fortnight)

| | | |
|-----------------------|--|-----------|
| Fuel | | \$ |
| Car registration | | \$ |
| Maintenance / repairs | | \$ |
| SUB-TOTAL | | \$ |

EXPENSES - Other (Per Fortnight)

| | | |
|------------------------|--|-----------|
| Child care | | \$ |
| Child support payments | | \$ |
| Pet expenses | | \$ |
| Alcohol & cigarettes | | \$ |
| School fees | | \$ |
| Other | | \$ |
| SUB-TOTAL | | \$ |

EXPENSES - Insurance (Per Fortnight)

| | | |
|-------------------|---|-----------|
| Home | ⇒ | \$ |
| Contents | ⇒ | \$ |
| Car / motorbike | ⇒ | \$ |
| Boat / caravan | ⇒ | \$ |
| Health | | \$ |
| Income protection | | \$ |
| Life | | \$ |
| SUB-TOTAL | | \$ |

EXPENSES - Repayments (Non HCCU Per Fortnight)

| | | |
|----------------------------|---|-----------|
| Mortgage | ⇒ | \$ |
| Car Loan | ⇒ | \$ |
| Personal Loan | ⇒ | \$ |
| Credit Cards | ⇒ | \$ |
| Store Cards/GE Credit line | ⇒ | \$ |
| Outstanding Accounts | ⇒ | \$ |
| Other | | \$ |
| Other | | \$ |
| SUB-TOTAL | | \$ |

SAVINGS

| | | |
|-------------------------|--|-----------|
| General savings | | \$ |
| Emergency savings | | \$ |
| Special purpose savings | | \$ |
| SUB-TOTAL | | \$ |

| | |
|-----------------------|-----------|
| TOTAL INCOME | \$ |
| TOTAL EXPENSES | \$ |
| = NETT RESULT | \$ |



Financial Hardship Application - Business

page 3

Additional Information (where applicable): You may wish to attach additional pages.

Business Plan
Cashflow statements and projections, profit and loss and balance sheet information
Gross profit projections
Debtor and creditor listings
Inventory management records
Documentation relevant to the business statutory obligations including payroll, taxation, superannuation, GST and workcover records.

Admin Use only

Received By: (please sign and Print name) _____

Date received: _____