



HERITAGE ISLE

Banking with friends

ABN 32 087 651 278

AFSL/Australian Credit Licence 246648

Financial Harship Application

Member Number: _____ Loan Type: _____

Borrower 1		Borrower 2	
Title		Title	
Full Name		Full Name	
Date of birth		Date of birth	
Current Address		Current Address	
Postal Address		Postal Address	
Residential Status		Residential Status	
Number of Dependants		Number of Dependants	
Age of Dependants		Age of Dependants	
Home Phone no		Home Phone no	
Work Phone no		Work Phone no	
Email Address		Email Address	
Next of Kin		Next of Kin	
Occupation		Occupation	
Employer Name		Employer Name	
Employer Address		Employer Address	
Date Started		Date Started	
Contact Name		Contact Name	
Contact No		Contact No	
Employment Status		Employment Status	

HARDSHIP RELIEF JUSTIFICATION – Please provide details below of what has changed in your circumstances causing you to experience financial difficulty in making repayments in your loan/s. (Please attach supporting evidence such as medical certificate, employee separation certificate, payslips etc. Applications cannot be considered unless appropriate supporting documents are provided).

Financial Harship Application – Statement of Financial Position

WEEKLY/FORTNIGHTLY/MONTHLY INCOME – (circle one) (Please include copy of current payslip/Centrelink letter etc)	
Wages (Person 1)	\$.....
Wages (Person 2)	\$.....
Total Centrelink Benefits. Details _____	\$.....
Board or Rent received	\$.....
Interest/Investment/Dividends. Details _____	\$.....
Child Support/Maintenance	\$.....
Other income. Details _____	\$.....
TOTAL INCOME	\$.....

MONTHLY LIVING EXPENSES			
HOUSING		INSURANCE	
Rent/Mortgage Cost	\$.....	House/Contents	\$.....
Council/Water Rates	\$.....	Health Insurance	\$.....
House Maintenance/Body Corp	\$.....	Car Insurance	\$.....
UTILITIES		Life Insurance	
Electricity/Gas	\$.....	CAR/TRAVEL EXPENSES	
Telephone (Mobile)	\$.....	Petrol/Repairs	\$.....
Telephone (Home)	\$.....	Car Loan Repayments	\$.....
Internet	\$.....	Registration	\$.....
PERSONAL/MEDICAL		OTHER COMMITMENTS	
Food/Groceries	\$.....	Credit Card Repayments	\$.....
Entertainment	\$.....	Personal Loans	\$.....
Doctor/Dentist	\$.....	Child Support/Maintenance paid	\$.....
Pharmaceuticals	\$.....	Other _____	\$.....
EDUCATION		Other _____	
School Fees	\$.....	Other _____	\$.....
Childcare Fees	\$.....	Other _____	\$.....
TOTAL EXPENSES			\$.....

- I/We believe that if the requested variation is approved, I/we will be able to meet my/our varied obligations under the loan contract.
- I/we understand that if the requested variation is approved it may have the effect of extending the term of the loan contract.
- I/we give my/our consent to the Credit Union verifying the above details with the persons referred to above or with a representative of such a person.
- I/We hereby declare that the statements and answers given in this application are to the best of my/our knowledge true and correct in every detail, and not misleading. *(All parties to the loan must sign.)*

SIGNATURE – Borrower 1

SIGNATURE – Borrower 2

Name

Name

____/____/____

____/____/____