

HARDSHIP RATE RELIEF APPLICATION FORM

Approved by the Director General of the Department of Local Government, in accordance with clause 135 of the Local Government (General) Regulation 2005 under the *Local Government Act 1993*.

APPLICATION FOR HARDSHIP RATE RELIEF FOR THE WHOLE OR PART OF THE YEAR COMMENCING 1 JULY 200_

**please answer all questions relevant to you using block letters and ticking appropriate boxes.*

Assessment No. _____

I, _____
(Full name in block letters)

of _____
(Address)

telephone number _____ apply for a concession on the basis of financial hardship.

Property Description (Lot/Plan) _____
(office use only)

(1) Do you receive any pensions or benefits? ☐ Yes ☐ No

If Yes, please provide type of pension and amount received per fortnight.

Pension: _____ Amount: _____

(2) Do you have a current Pensioner Concession Card issued by the Commonwealth Government? ☐ Yes ☐ No

PCC No. _____ Date of Grant _____

(3) Have you claimed a pensioner concession on any other property this year? ☐ Yes ☐ No

If Yes, state the address of the other property _____

(4) Is this property your sole or principal place of living? ☐ Yes ☐ No

The property for which I am claiming has been my sole/principal place of living since _____

(5) I am liable for the payment of rates and charges on this property, together with others as listed below. (If no others, write "SOLE OWNER") _____

Please provide details of all “other” persons indicated in Question 5. **(ALL OWNERS other than the applicant should be listed, including your spouse):**

Name	PCC Holder Y/N	Pension No	Date of Grant	Relationship to me (eg: spouse, father, co-owner etc)	Resident of Property Y/N	% of ownership

Evidence of joint ownership is attached/has been provided to council previously (circle whichever is applicable).

(6) Is the property owned as shares in a company title? ☐ Yes ☐ No
If you do not own or rent the property, please explain why you are liable to pay the rates _____

(7) Are there people living at the property other than those listed at Question 5? ☐ Yes ☐ No

(8) Please indicate who these people are?
☐ Self
☐ Spouse
☐ Children (State ages _____)
☐ Boarders
☐ Relatives
☐ Other (please specify)

(9) Do you own (either fully or partially) any other land or buildings?
☐ Yes ☐ No

If yes, list addresses.

(10) How many children do you support? _____ State ages _____

(11) What is the cause of financial hardship? _____

(12) How long have you been experiencing hardship? _____

(13) Please state gross weekly amount received in dollars and cents from the following sources of income:

a) Pensions and benefits \$ _____

b) Compensation, superannuation insurance
or retirement benefits \$ _____

c) Spouse's income \$ _____

d) Income of other residents of the property \$ _____

e) Casual/part-time employment \$ _____

f) Family allowance \$ _____

g) Interest from banks/credit unions/building
societies \$ _____

(14) Please provide name and current balance of all bank, credit union or building society accounts held by you.

(15) Please state details of fortnightly outgoings.

Outgoing	Owed to	Amount
Rent/Home Loan		
Other mortgages		
Personal loans/Hire purchase		
Health Costs		
Council rates and charges		

Please attach a separate page with any other relevant information you feel may assist your application.

I hereby declare that the information provided is true and correct. **If you make a false statement in an application you may be guilty of an offence and fined up to \$2,200.**

Signature:_____ Date:_____

IMPORTANT NOTICE

CUSTOMER CONSENT

For the sole purpose of authorising the council to confirm with Centrelink whether or not the detail I have provided to the council matches Centrelink or other Commonwealth portfolio department or agency records in relation to the current status of my Commonwealth Benefit:

I _____(full name) authorise the council to confirm with Centrelink the following details:

- Pension No.
- Name
- Address
- Postcode, and
- That I am a valid concessional card holder

I agree that, unless I revoke my consent, this Customer Consent record is a permanent consent, and may be relied on by the council until such time as I revoke it.

I may revoke this Customer Consent record at any time by giving the council **written** notice that my consent is revoked. I understand if I revoke this consent, I may not be eligible for the concession given by the council.

I acknowledge I have read and understood this Customer Consent record.

Signature:_____ Date:_____

PRIVACY AND PERSONAL INFORMATION PROTECTION ACT 1998 Compliance with Section 10

The information contained in this application form and any information requested for the purpose of assessing eligibility for a pensioner concession is required under the Local Government Act 1993 and the Local Government (General) Regulation 2005.

This information is required before your application for a pensioner concession can be processed. The information is private and confidential and council must not disclose the information to any person or body if it is not directly related to the purpose for which the information was collected.

If you have a complaint about the use of your personal information, contact the council's Public Officer. The information contained or referred to in this application form may be corrected and updated by you, by contacting the council.

PURPOSE OF THIS FORM

This form is to be completed by ratepayers wishing to receive a concession on council rates. Eligible ratepayers are entitled to receive up to:

- \$250.00 on ordinary rates and charges for domestic waste management services
- \$87.50 off their annual water rates and charges
- \$87.50 of their annual sewerage rates and charges

Generally, the concessions are available to eligible pensioners, however concessions may be granted to ratepayers suffering financial hardship in certain circumstances.

The information provided by completing this form will enable council to determine eligibility to receive a concession and the level of concession the ratepayer is entitled to.

الغرض من هذا النموذج

يجب إكمال هذا النموذج بواسطة دافعي الرسوم البلدية، والراغبين في استلام تخفيض على رسوم المجلس البلدي. ويحق لدافعي الرسوم المؤهلين استلام مبالغ تصل إلى:

● \$ 250,00 على الرسوم العادية والتكاليف لخدمات إدارة النفايات المنزلية

● \$ 87,50 من الرسوم السنوية وتكاليف السماء

● \$ 87,50 من الرسوم السنوية وتكاليف تصريف مياه المجاري

بصفة عامة، فإن التخفيضات متاحة للمتقاعدين المؤهلين، ومع ذلك فقد تُمنح التخفيضات لدافعي الرسوم الذين يعانون متاعب مالية في حالات خاصة.

المعلومات المتوفرة بإكمال هذا النموذج سوف تجعل المجلس البلدي قادرا على تحديد الأهلية لاستلام تخفيض، ومستوى التخفيض الذي يستحقه دافع الرسوم.

此表格的用途

此表格供希望獲得市政稅優惠的納稅人填寫。符合資格的納稅人最高可獲得以下減價優惠：

普通市政稅及垃圾管理費減價250.00澳元

年度水費及管理費減價87.50澳元

年度廢水處理稅及管理費減價87.50澳元

符合資格的福利金領取者一般可獲得這些減價優惠。但是在某些情況下，有經濟困難的納稅人也可獲得這些優惠。

在此表格內填寫的訊息可協助市政會決定該納稅人是否有資格獲得減價優惠，以及優惠的等級。

A cosa serve questo modulo

Questo modulo deve essere riempito dai contribuenti che desiderano ricevere riduzioni sulle imposte comunali. I contribuenti che soddisfano i requisiti necessari possono ricevere le seguenti riduzioni:

- fino a \$250.00 sulle imposte comunali ordinarie e sulla bolletta per l'asporto dei rifiuti domestici;
- fino a \$87.50 sulla imposta annuale e bolletta dell'acqua;
- fino a \$87.50 sulla imposta annuale e bolletta delle fognature.

In linea generale le riduzioni vengono concesse solo ai pensionati aventine diritto ma, in alcune circostanze, possono essere estese anche ai contribuenti che si trovino in difficili situazioni economiche.

Le informazioni fornite riempiendo questo modulo consentiranno al Comune di determinare se il contribuente ha diritto alle riduzioni d'imposta e l'ammontare delle riduzioni stesse.

OBJETIVO DE ESTE FORMULARIO

Los contribuyentes que deseen recibir una rebaja en las contribuciones municipales deben responder a este formulario. Quienes reúnan los requisitos podrán recibir hasta:

- \$250,00 en contribuciones y tarifas ordinarias por servicios de administración de desechos domésticos.
- \$87,50 de rebaja anual en las contribuciones y tarifas por agua potable.
- \$87,50 de rebaja anual en las contribuciones y tarifas por alcantarillado.

En general, las rebajas están a disposición de los pensionados que reúnan los requisitos. Sin embargo, se podrán conceder rebajas a los contribuyentes que pasen por privaciones económicas en ciertas circunstancias.

La información que se proporcione respondiendo a este formulario permitirá al municipio determinar tanto si el contribuyente reúne los requisitos para recibir una rebaja como el monto de la rebaja a la cual tendrá derecho el contribuyente.

MỤC ĐÍCH CỦA ĐƠN NÀY

Đơn này cho những người đóng thuế địa phương muốn xin giảm thuế và lệ phí. Những người đóng thuế và lệ phí địa phương có thể được giảm đến:

- \$250 cho thuế địa phương thường và lệ phí cho dịch vụ đổ rác
- \$87.50 cho tiền nước và lệ phí hàng năm
- \$87.50 tiền cống rãnh và lệ phí hàng năm

Nói chung, những người hội đủ điều kiện để lãnh trợ cấp xã hội được giảm thuế và lệ phí địa phương, tuy nhiên trong một số trường hợp, những người gặp khó khăn về tiền bạc cũng có thể được giảm thuế và lệ phí.

Những chi tiết điền trong đơn này sẽ giúp hội đồng thành phố (council) ấn định xem quý vị có hội đủ điều kiện hay không và mức độ được giảm thuế và lệ phí.