

		State	Postcode
Mobile No.		Work Phone No. ()
		State	Postcode
Email Address			
Length of Employment	Yrs	Mths	
		State	Postcode
Email Address			
Length of Employment	Yrs	Mths	
		State	Postcode
Email Address		State	Postcode
	Email Address Length of Employment Email Address	Email Address Length of Employment Yrs Email Address	Mobile No. Work Phone No. (State Email Address Length of Employment Yrs Mths State State Email Address



Employment Information (Continued)				
Customer 4				
Employer				
Employer Address			State	Postcode
Work Phone No. ()	Email Address			
Position/Occupation	Length of Employment	Yrs	Mths	
Assets		-4'41\/-1	Ф	
Description Description		stimated Val	ue \$	
Primary Residence Address	\$		04-4-	Destroyle
			State	Postcode
Other Real Estate Address(es)	\$			
1.			State	Postcode
2.			State	Postcode
Motor Vehicles (Please specify below)				
	\$			
	\$			
	\$			
	\$			
Savings Accounts (Please specify below)				
	\$			
	\$			
	\$			
Superannuation (Please specify below)				
	\$			
	\$			
	\$			



Assets (Continued)		
Description	Est	timated Value \$
Investments/Shares (Please specify below)		
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total Asset Value	\$	
Liabilities		
Description	Bala	ance Owing \$
Mortgages (Name of lender financial services pro	ovider)	
1.	\$	
2.	\$	
3.	\$	
Personal Loans/Car Loans/Leases/Hire Purchase	e (Name of lender financial service	es provider)
1.	\$	
2.	\$	
3.	\$	
Credit Card/Store Cards (Name of lender financia	al services provider)	
1.	(Limit) \$	\$
2.	(Limit) \$	\$
3.	(Limit) \$	\$
4.	(Limit) \$	\$
Total Liabilities	\$	



Income (Weekly/Fortnightly/Monthly)		
Description	Borrower 1	Borrower 2
Gross Salary/Wages	\$	\$
Pension (Specify type)	\$	\$
Government Assistance (Specify type)	\$	\$
Child Support	\$	\$
Rental Income	\$	\$
Other (Specify)	\$	\$
Total Income	\$	\$

NOTE: Please provide a copy of your most recent payslip or Department of Human Services ('DHS') letter to evidence income.

Expenses	
Description	Minimum Monthly Repayment \$
Mortgage No.1	\$
Mortgage No.2	\$
Mortgage No.3	\$
Personal Loan No.1	\$
Personal Loan No.2	\$
Personal Loan No.3	\$
Credit Card No.1	\$
Credit Card No.2	\$
Credit Card No.3	\$
Credit Card No.4	\$
Entertainment	\$
Rates	\$
Electricity/Gas	\$
Telephones/Mobile Telephones	\$



Expenses (Continued)	
Description	Minimum Monthly Repayment \$
Motor Vehicle Expenses	\$
Insurance (Health/Vehicle/House/Contents etc.)	\$
Other (Please provide details)	\$
Total Expenses	\$
Details for proposed arrangement (i.e. length of period, number of repayments, new repayment if reduced, a	amount to be capitalised, new balance, new LVR etc.).
Miles to a second and the second to the second the second the second the second to the	
What arrangements are in place with other Credit Providers?	
Are these arrangements up to date?	
NOTE: Please provide any documentation regarding these matters.	



Illness	Medical certificate supporting sickness/illness, time off work and prognosis for an anticipated date of return to work.
Naternity leave	Medical certificate confirming pregnancy and when baby is due OR letter from employer confirming pregnancy and length unpaid maternity leave to be taken.
Vorkers Compensation	Confirmation from employer confirming workers compensation payment, anticipated date of return to work and salary on recommencement of work.
Vorkers Compensation No Longer Employed	Documentation from solicitor outlining case and current status of case/claim.
Jnemployed	Documentation confirming unemployment – Separation Certificate. If redundant, then a Redundancy Certificate including redundancy payments. Documentation also confirming registration as unemployed with Centrelink.
ncome Reduction	Documentation from employer showing reduction in income and anticipated date, if any, when income will return to previous levels. In nature of employment, or employer change, reason for change and documentation showing actual reduction in income experienced.
Deceased Borrower	Death Certificate. Documentation indicating anticipated date of probate, release of insurance funds etc.
Relationship Split	Nature of relationship split, including documentation of any Family Court Orders granted or anticipated granting of such orders if applicable.
Business Failure	If business totally failed, documentation confirming receivership, administration or closure of business. If business is not achieving anticipated profits/suffering from downturn, documentation preferably from an accountant including latest and previous years profit and loss statement and balance sheet.
Property on Market	If property is for sale, a current sales agreement or sales contract (if applicable) from relevant REAL Estate Agent showing asking price, date etc.
	information that may expire with the approximent of this Haydehin Application
	information that may assist with the assessment of this Hardship Application
Signatures	Signature Date / /
Signatures Customer 1 (Name)	
	Signature Date / /