

Branch Use Only:

- All relevant fields are filled in
- All borrowers have signed
- Sent to: Customer Assist Team

Staff: _____

Branch: _____

Hardship Application

Application for consideration under financial hardship

Anyone can experience temporary financial problems for a variety of reasons. Whether you are financially over committed, encounter job loss or reduced hours, become ill or injured, our Hardship program aims to confidentially tailor solutions to help you, based on your individual circumstances.

Borrower 1

Mr Mrs Ms Miss Other _____

Given name(s): _____

Last name: _____

Member number: [grid]

Date of Birth: [grid] / [grid] / [grid]

Postal address: _____

Suburb: _____

State: [grid] Postcode: [grid]

Email address: _____

Home phone: [grid]

Work phone: [grid]

Mobile phone: [grid]

Age of dependents: _____ None

NPBS Loan numbers you are seeking assistance for:

[Grid of boxes for NPBS Loan numbers]

Current Employer's name: _____

Employer's address: _____

State: [grid] Postcode: [grid]

Position held/occupation: _____

Time employed: _____

Borrower 2 Guarantor (please tick one)

Mr Mrs Ms Miss Other _____

Given name(s): _____

Last name: _____

Member number: [grid]

Date of Birth: [grid] / [grid] / [grid]

Postal address: _____

Suburb: _____

State: [grid] Postcode: [grid]

Email address: _____

Home phone: [grid]

Work phone: [grid]

Mobile phone: [grid]

Age of dependents: _____ None

NPBS Loan numbers you are seeking assistance for:

[Grid of boxes for NPBS Loan numbers]

Current Employer's name: _____

Employer's address: _____

State: [grid] Postcode: [grid]

Position held/occupation: _____

Time employed: _____

Security Address

Postal address: _____ Suburb: _____

State: Postcode:

Reason for Hardship

- Unemployment Date employment ended: / /
- Reduction in Income – Employed Date reduction started: / / By: \$ per _____
- Reduction in Income – Self Employed Date reduction started: / / By: \$ per _____
- Reduction in Income – Investments Date reduction started: / / By: \$ per _____
- Over committed (for example bills, loans, etc)
- Relationship breakdown
- Health related
- Other

Please provide relevant details relating to your financial hardship:

To help us better understand your situation, if your reason for financial hardship is related to unemployment or reduction of income, please advise us of your income PRIOR to your change of circumstances:

Previous income details	Borrower 1	Borrower 2/Guarantor	Borrower 3/Guarantor
Amount	\$ _____	\$ _____	\$ _____
Payment Frequency	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
Tax	<input type="checkbox"/> After tax	<input type="checkbox"/> After tax	<input type="checkbox"/> After tax

Please provide us with documentation that supports your financial hardship claim, such as:

- Unemployed – Separation certificate/Termination Letter
- Selling property – Contract for the sale of land
- Medical certificate
- Other

Note: if you do not hold a transactional account with NPBS, we require a copy of your most recent statements for the period of three (3) months and two (2) most recent payslips.

Please explain why you are not able to include documentation related to your change of circumstances (if applicable):

Type of Temporary Assistance Required

How would you like Newcastle Permanent to assist you?

- Stop full repayments for months.
- Move the arrears into the balance of your loan so you are no longer behind in your repayments (Capitalise the arrears). Note: Home & Personal Loans only.
- Stop full repayments for months and capitalise your arrears.
- Reduce your monthly repayments to \$ for months.
- Other, please specify: _____

Note: Hardship Assistance may not include converting or extending your facility or amending/changing interest rates.

If approved, can you please explain how you will meet your repayments once the period of assistance ends:

Current income

Please provide details of your CURRENT income circumstances:

Type of income	Borrower 1	Borrower 2/Guarantor	Borrower 3/Guarantor
Payment Frequency	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
Tax	<input type="checkbox"/> After tax	<input type="checkbox"/> After tax	<input type="checkbox"/> After tax
Salary/Wages	\$	\$	\$
Commission/Overtime	\$	\$	\$
Rent/Board income	\$	\$	\$
Pension	\$	\$	\$
Unemployment	\$	\$	\$
Child Support	\$	\$	\$
Family Tax Benefit	\$	\$	\$
Other Government Assistance payment type:	\$	\$	\$
Other:	\$	\$	\$

Living Expenses *(please see back page for definitions to assist in completing this section)*

Expense type	Monthly amount
Food, alcohol, and general groceries	\$
Clothing, footwear and accessories	\$
Housing costs (e.g. rent, bills etc.)	\$
Loan repayments (e.g. Home and/or Personal Loan/Credit Card)	\$
Home services	\$
Personal services and Personal insurances	\$
Private health insurance	\$
Other medical expenses (not covered by private health insurance)	\$
Transportation	\$
Education/Child minding	\$
Telephone/Mobile	\$
Recreation/entertainment	\$
Total monthly living expenses	\$

Liabilities (what you owe)

Loans

Loan type					
Financial institution					
Original loan amount	\$	\$	\$	\$	\$
Current balance	\$	\$	\$	\$	\$
Repayment (per month)	\$	\$	\$	\$	\$
Under an arrangement?(Y/N)					
Concessional Arrangement					
Date arrangement ends					

Credit cards/Store cards

Issuer					
Account number					
Limit	\$	\$	\$	\$	\$
Current balance	\$	\$	\$	\$	\$
Repayment (per month)	\$	\$	\$	\$	\$
Under an arrangement?(Y/N)					
Concessional Arrangement					

Is there any other information that may assist us in the assessment of your application?

Assets (what you own)

Real Estate

Address	Mortgaged to	Estimated value
		\$
		\$
		\$

House and/or Contents Insurance

Address	Type of insurance	Policy current?	Insured amount
		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
		<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

Savings/Investments

Financial institution					
Account number					
Balance/value	\$	\$	\$	\$	\$

Motor Vehicles

Year	Make	Model	Estimated value
			\$
			\$
			\$

Other Assets

Description (caravan, boat etc)					
Estimated value	\$	\$	\$	\$	\$

Other information

Is there any other information that may assist us in the assessment of your application?

Have you discussed your situation with a Financial Counsellor/Budget Advisor? Yes No

If so, who? _____

Contact number: Contact Name: _____

Have they prepared a budget for you? Yes No

If Yes, please provide a copy of the prepared budget.

Declaration

IMPORTANT: Your debt repayment commitments must be maintained while this application is being assessed.

- I/We declare that the information in this application is true and correct, and I/we have not withheld any information which may affect Newcastle Permanent's decision.
- I/We give Newcastle Permanent Building Society (NPBS) authority to seek from, use, or give to, any financial consultant, lawyer, or _____ (full name of person assisting you), any consumer credit information (including but not limited to past or present details of my/our loans or credit with NPBS) or to discuss this application with any of the aforementioned.
- I/We give NPBS authority to change my/our credit contract/s to assist me/us in this time of 'Financial Hardship'.
- I/We understand that this may increase my/our required repayments at the end of the assistance period, if assistance is provided.

Signatures

Borrower 1 Signature: _____ Date: / /

Borrower 2/Guarantor Signature: _____ Date: / /

Hardship Process

Once the completed Hardship Application has been received, NPBS has 21 days to provide you with a written response outlining the decision. If NPBS requires any additional information in order to complete the assessment, NPBS will write to you with the requirements. You have 21 days from the date we make the request to provide the information. If the information has not been received within the 21 day timeframe, NPBS will treat your application as withdrawn. If you subsequently wish to re-apply for hardship assistance you will need to complete a new Hardship Application and start the process from the beginning.

Please return the application to:

- Your local Newcastle Permanent branch; or
- Email: CustomerAssist@npbs.com.au; or
- Post: Attention: Customer Assist Team, PO Box 5001, HRMC, NSW 2302.

Guide to completing the Living Expenses section

When completing the Living Expenses section you are required to include all expenses incurred by you and your family unit. Below are examples of expenses listed in each category that can be typically incurred by a family unit. As these are only examples, it is the responsibility of the Applicant to disclose all expenses.

Food, alcohol and general groceries:

Food and alcohol consumed at home, in restaurants, hotels and clubs etc; takeaway food; laundry and cleaning products; toiletries; cigarettes and tobacco; pet food and other general groceries.

Clothing, footwear and accessories:

General clothing, footwear and accessories; sportswear; work/school uniforms and footwear etc.

Housing costs:

Utilities (i.e. council rates, electricity, water and gas); bottled gas or oil; body corporate/strata fees; repairs, maintenance and renovations; house and contents insurance; replacement of household appliances, goods, furniture and furnishings; garden plants and equipment etc.

Home services:

House keeper/cleaner; ironing services; pool and garden maintenance; pest services; security services etc.

Personal services and Personal insurances:

Hairdressing; beautician and general cosmetic services; dry cleaning; personal injury insurance; personal items insurance etc.

Private health insurance:

Private health insurance for ambulance, medical, hospital, optical and dental etc.

Other medical expenses (not covered by private health insurance):

All general and specialist medical, dental, optical, chiropractic and physio therapy expenses; medicines; pharmaceutical items and prescriptions etc.

Transportation:

Motor vehicle/cycle/trailer/caravan/boat registrations and insurances; service and maintenance costs; fuel costs; public transport fares; road tolls; parking fees etc.

Education/Child minding:

Government or private school fees; preschool fees; before and after school care, and child care fees; tertiary education fees; tuition fees; personal association fees etc.

Telephone/Mobile:

Landline phone, mobile phone, internet connections and other communication costs etc.

Recreation and entertainment:

Pay TV; newspapers, books, magazines, CDs and DVDs; cinema tickets; computer games; sports equipment and participation fees; sports club/gym fees; domestic and international holidays (includes air/bus/rail fares, petrol, accommodation, tours); general leisure activities etc.