



District Council of Cleve

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HARDSHIP APPLICATION RATES PAYMENT ARRANGEMENT AND/OR POSTPONEMENT OF RATES

The District Council of Cleve is committed to assisting ratepayers who are experiencing temporary or ongoing financial hardship by offering flexible payment arrangements and/or a postponement of rates payable.

APPLICANT DETAILS	
Name:	
Postal Address:	
Email:	
Phone Number:	
PROPERTY DETAILS	
Assessment Number:	
Property Address:	
Property Owner:	
Phone Number:	
Amount Due:	
PAYMENT ARRANGEMENT/POSTPONEMENT CRITERIA	
In assessing a ratepayer's eligibility for hardship assistance, Council will consider indicators including (but not limited to) whether the ratepayer: <i>(Please tick all that apply)</i> ☐ holds a Services Australia (Centrelink) low income health care card or pensioner concession card; ☐ has a payment history that indicates they have had difficulty meeting their rate notice obligations in the past; ☐ through self-assessment, has identified their position regarding their inability to pay; ☐ has identified other personal circumstances they may choose to disclose in support of their application. ☐ Please provide supporting documentation you may have to assist with our determination. <i>Please note that any applications for payment arrangements that will not clear the outstanding debt in a reasonable timeframe may not be approved.</i>	

PAYMENT ARRANGEMENT *(may be subject to further negotiation)***Can you afford to make regular payments:**☐ YES☐ NO**If Yes, How much can you afford to pay:**

\$

Payment Frequency:☐ WEEKLY☐ FORTNIGHTLY☐ MONTHLY**Date Commencing:****POSTPONEMENT OF RATES** *(may be subject to further negotiation)***Postponement of Rates:**☐ YES☐ NO**Postponement Amount:**

\$

Postponement Timeframe☐ 3 MONTHS☐ 6 MONTHS**Date Commencing:****APPLICANT'S SIGNATURE**

I, _____, hereby apply for a payment arrangement and/or postponement of rates due to Council as detailed above.

SIGNED: _____ DATE: _____

APPLICATION ASSESSMENT *(Office use only)***Application Approved:**☐ YES / ☐ NO**Date of Agreement:****Additional Comments:**

SIGNED: _____ DATE: _____

David Penfold
Chief Executive Officer