

### Financial Hardship Assistance Form

So we can assist you, please complete all relevant sections. For sections that are not relevant to you, please mark with 'N/A', or \$0. The information you provide to us will only ever be used to help us manage your account with us. Providing extra information will help us to review your request and help us to best assist you.

<b>Personal Details</b>	
Please fill out the following information. For sections that are not relevant to you, please mark with 'N/A'. You can find your reference number on correspondence from Complete Credit Solutions.	
Reference Number (5 or 6 digit file number)	
First Name	
Middle Name	
Last Name	
Date of Birth	
How many dependants do you financially support (Include anyone who relies on you for financial support, including adults e.g. your spouse, partner, child or relatives)	
What is your relationship to Complete Credit Solutions?	<input type="checkbox"/> Customer (Individual who has the debt with CCS) <input type="checkbox"/> Co-borrower (Additional borrower who has co-signed the original loan/debt documents who are equally liable as the primary borrower to repay the debt) <input type="checkbox"/> Guarantor (Individual who is legally responsible for paying back the loan/debt) <input type="checkbox"/> Authorised Third Party (You are acting on behalf of the customer, and the customer has already authorised you on the account. If not yet authorised, the customer can call Complete Credit on 1300 930 070, complete our Customer Identification Process, and verbally authorise a third-party if required.) <input type="checkbox"/> Financial Counsellor * <input type="checkbox"/> Solicitor * <input type="checkbox"/> Credit Repairer * * If not already provided, please return a completed letter of authority with this request. Alternatively, complete the 'Authorised Representative' Form on our website under the 'Self Service' tab and submit with the Letter of Authority <a href="http://www.completecredit.com.au/representative">www.completecredit.com.au/representative</a> .

**Contact Details**

Please fill out the following information for the primary borrower/customer with the debt. For sections that are not relevant to you, please mark with 'N/A'

Email	
Mobile	
Preferred Method of Contact	
Street Address (If you live in an apartment or unit complex, please add your apartment number as well as street number)	
Suburb	
State/Country	
Post Code	
Home Phone	
Authorised Third Party Name	
Authorised Third Party Email	
Authorised Third Party Mobile	
Authorised Third Party Preferred Method of Contact	

### Hardship Application

Please fill out all relevant questions to help provide us a better understanding of why you are requesting financial hardship and how long you think you may be in this situation. For sections that are not relevant to you, please mark with 'N/A'

<p>Why are you requesting financial assistance? (Select at least one which best describes your current situation)</p>	<input type="checkbox"/> Temporary Disability (such as a recovery period following surgery or medical treatments) <input type="checkbox"/> Injuries / Illness (medical conditions impacting ability to work) <input type="checkbox"/> Changes to Household Income (unemployed, under- employed, reduced work, maternity / paternity leave) <input type="checkbox"/> Business Downturn <input type="checkbox"/> Rising Cost of Living / Over Extended (indebtedness to credit arrangements) <input type="checkbox"/> Relationship Separation <input type="checkbox"/> Permanent Disability (which will prevent an individual from being able to work full-time for the rest of their life) <input type="checkbox"/> Natural or Crisis Disasters <input type="checkbox"/> Mental Health <input type="checkbox"/> Addictions <input type="checkbox"/> Incarceration <input type="checkbox"/> Fraud / Robbery <input type="checkbox"/> Limited Access to Communications (homeless, family / domestic violence including financial or elder abuse)
<p>When did your situation change? (Enter date in MM/YYYY format)</p>	
<p>Tell us the maximum time you might need financial support? (This helps us better understand what type of assistance we can offer you)</p>	<input type="checkbox"/> 0 to 3 months <input type="checkbox"/> 3 to 6 months <input type="checkbox"/> 6 to 12 months <input type="checkbox"/> Ongoing
<p>How much money do you have left after all essential expenses?</p>	
<p>Are you dealing with any other debt?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If you select yes above, please elaborate on these debts (How many, to whom and how much?)</p>	
<p>Tell us a bit about your situation (These details will help us better understand how we can help you)</p>	

<b>Income</b>	
<p>We are going to ask for a bit more information about your current income, assets and expenses. Your income refers to household income which includes any source of income you are dependent on, including a spouse/partner's income. Your assets also include any assets of your partner. Your expenses and repayments refer to Household Expenses and include your own personal expenses and expenses of your spouse/partner and dependants. For sections that are not relevant to you, please mark with 'N/A', or \$0.</p>	
Primary Income (Include the amount and frequency of payment e.g. weekly, fortnightly, monthly)	
Lump Sums (Bonus, Tax Returns)	
Other Income 1 (Include the amount and frequency of payment e.g. weekly, fortnightly, monthly)	
Other Income 2 (Include the amount and Frequency of payment e.g. weekly, fortnightly)	
<b>Assets</b>	
Savings	
Shares/Investments	
Vehicle	
Property Owned	
Other (including Crypto Currency)	
<b>Expenses</b>	
Rent/Mortgage	
Child/Dependant Expenses	
Food & Groceries	
Medical, Health & Fitness	
Education	
Clothing & Personal Care	
Transport (Fuel, Repairs, Public Transport, Other Running Costs)	
Utilities (Gas, Electricity, Water)	
Communication (Internet, Landline, Mobile)	
Loans/Credit (Personal Loans, Credit Card, Other Debt)	
Insurances (Life, Vehicle, House, Health)	
Infringement Notices	
Other Expenses & Purchases	

### Repayments

Include any student loans, child support payments, Tax Office debts, or court ruled debts. We may ask for documents to confirm these details e.g. bank statements, court orders or legal documentation. If you do not have any debts, leave this blank.

#### Repayment 1

Description	
Total Amount Owing	
Repayment Amount	
Repayment Frequency	
Interest Rate	

#### Repayment 2

Description	
Total Amount Owing	
Repayment Amount	
Repayment Frequency	
Interest Rate	

#### Repayment 3

Description	
Total Amount Owing	
Repayment Amount	
Repayment Frequency	
Interest Rate	

#### Proposed Payment Arrangement to CCS

Amount	
Frequency	
Commencement Date (Enter date in DD/MM/YYYY format)	
Method of Payment (direct debit, debit card, BPAY, manual payment)	

### Supporting Documents

We may request documentation from you to better understand your situation. Providing documents now can assist with expediting your request, however, we still may need to request further documentation.

<p>Evidence of income, these may include:</p> <ul style="list-style-type: none"> <li>• Payslips</li> <li>• Bank Statements</li> <li>• BASS / PAYG Statements</li> <li>• Tax Returns</li> <li>• Government Income Support Payment (e.g. Centrelink Statements or WINZ Statements)</li> <li>• Group Certificates</li> </ul> <p>Evidence of circumstance, these may include:</p> <ul style="list-style-type: none"> <li>• Medical Certificate</li> <li>• Death Certificate</li> <li>• WorkCover Claim</li> <li>• Superannuation Statement</li> <li>• Police Report / Protection Order</li> <li>• Insurance Claim</li> <li>• Court Documents</li> <li>• Statutory Declaration</li> <li>• Creditor Notices / Bills</li> <li>• Eviction Notices / Tenancy</li> <li>• Letters of Authority</li> <li>• Letter of Support (e.g. from Medical Professional / Doctor / etc.)</li> <li>• Separation Certificate</li> </ul>	
<p>Declaration</p>	<p><input type="checkbox"/> I declare that the information in this statement and the supporting documentation provided by me is true and correct in every detail and provides full disclosure of my financial circumstances sufficient for Complete Credit Acquisitions Pty Ltd to make an informed decision with respect to my financial hardship.</p>
<p>Signature</p>	
<p>Form was completed by Name</p>	
<p>Date of completion (Enter date in DD/MM/YYYY format)</p>	