



FINANCIAL HARDSHIP APPLICATION

The Shire of Derby/West Kimberley accept that people may experience significant financial hardship as a result of circumstances experienced throughout their lives. Our aim is to aid applicants during times of financial stress.

Debtors who are facing payment difficulties due to financial hardship can apply to enter into a payment plan with the Council. The payment plan will be subject to the conditions outlined in the Shire of Derby West Kimberley Financial Hardship Policy.

As per Council's Hardship Policy, each application will be reviewed and assessed to identify eligibility of the Financial Hardship Criteria. Applicants are encouraged to provide as much information as possible to support their application. This information will solely be used for the purpose of assessing the application and will be kept confidential.

1. Owner/Debtor Property Information

Assessment Number	
Property Address	
What is the property's rates account balance?	
What financial year/s does the debt relate to?	
Is the property owner/occupied or is it a	
If the property is a rental who is the managing	
Lease Type?	

2. Owner/Debtor Information

Are you the sole owner/Debtor of the property?	
Company Name (if applicable)	
Surname	
Given Names	
Residential Address	
Postal Address	
Email Address	
Mobile No.	
Phone No.	

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3. Financial Hardship

Is your request for assistance caused by the impact of a declared emergency?

Yes No

If yes, please specify type of emergency:

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Please tell us how you have been paying your rates account?

<input type="checkbox"/>	Instalments (x 2 payments)
<input type="checkbox"/>	Instalments (x 4 payments)
<input type="checkbox"/>	Payment Plan: Active or cancelled due to reaching maximum number of defaults?
<input type="checkbox"/>	Other (please explain)

Please tell us about your financial position by indicating the reason/s below:

<input type="checkbox"/>	I have become unemployed.
<input type="checkbox"/>	My pay has been reduced.
<input type="checkbox"/>	I have been stood down.
<input type="checkbox"/>	I have had to take time off work to care for a family member.
<input type="checkbox"/>	I have had to self-isolate.
<input type="checkbox"/>	I have been diagnosed with a communicable disease and am unable to work.
<input type="checkbox"/>	Death in the family.
<input type="checkbox"/>	Temporary physical and mental health problems.
<input type="checkbox"/>	Domestic or family violence.

If your circumstances have changed in another way, please explain:

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(08) 9191 0999 | 30 Loch Street
 sdwk@sdwk.wa.gov.au | PO Box 94, Derby WA 6728

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Shire of Derby / West Kimberley

Have you or your employer applied for any of the Federal or State Government's assistance or other financial assistance measures? (for example, JobSeeker or JobKeeper payments, access to Superannuation)? Please indicate:

- JobSeeker Payment
- JobKeeper Payment
- Other (please specify below):

Please explain:

How long do you expect you will be experiencing financial difficulty?

- | | |
|--------------------------|---------------------|
| <input type="checkbox"/> | 1-3 Months |
| <input type="checkbox"/> | 3-6 Months |
| <input type="checkbox"/> | 6 Months and longer |

Please explain the reasons:

4. Income and Expenditure – Please complete the sections below:

Income – Gross weekly amount received		Frequency	Amount
<input type="checkbox"/>	Wage and Salaries		\$
<input type="checkbox"/>	Pension or other government benefits		\$
<input type="checkbox"/>	Spouse or partners income		\$
<input type="checkbox"/>	Interest from banks and financial institutions or dividends		\$
<input type="checkbox"/>	Compensation, superannuation insurance or retirement benefits		\$
<input type="checkbox"/>	Have you received any other income? (child support, rental income)?	Please state type of payment:	\$
Income Total			\$

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Expenditure outgoings weekly		Provider Name	Frequency	Amount
<input type="checkbox"/>	Mortgage/Home loan			\$
<input type="checkbox"/>	Other mortgages/business loans			\$
<input type="checkbox"/>	Other loans			\$
<input type="checkbox"/>	Credit Cards			\$
<input type="checkbox"/>	Utilities	Power		\$
		Water		\$
		Rates		\$
		Phone		\$
<input type="checkbox"/>	Insurances			\$
<input type="checkbox"/>	Living Expenses			\$
Expenditure Total				\$

INCOME AND EXPENDITURE SUMMARY	Total Income	\$
	Less Total Expenditure	\$
	TOTAL BALANCE	\$

5. Dependents

Do you have dependents you are supporting? Please indicate:

<input type="checkbox"/>	Spouse / Partner	
<input type="checkbox"/>	Children	Number of dependents: <input type="text"/>
<input type="checkbox"/>	Other (Please name):	<input style="width: 100%;" type="text"/>

6. Payment Proposal

What is the payment amount and frequency you can afford to commit to?

Amount	<input style="width: 100%;" type="text"/>
Frequency	<input style="width: 100%;" type="text"/>

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7. Supporting Documentation

To assist us with your application, please provide on lodgment the relevant documentation to support your financial hardship application. As per below:

- Bank Statement/s
- Medical Certificate
- Centrelink
- Letter from employer
- Letter from a Provider who has deemed you to be experiencing financial hardship (e.g. bank, super fund, utilities)
- Letter from an authorised financial counsellor or planner confirming financial hardship
- Documentation such as a statutory declaration from a person familiar with your financial circumstances (e.g. family doctor, accountant)

Declaration

I confirm that the information provided within this Application for Financial Hardship is accurate, and there have been no misrepresentations or omissions of fact that would otherwise influence the review and decision of Shire of Derby/West Kimberley.

I declare that I am the Debtor and authorised person of the above-mentioned property.

Signature of Applicant

Date:

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Processing Your Application

Once you have completed this form please use one of the below delivery methods:

Post

Shire of Derby West Kimberley

Att: Senior Finance Officer Operations
PO Box 94
DERBY WA 6728

Email

rates@sdwk.wa.gov.au

Subject: Financial Hardship Application – Property Assessment Number

In person

Shire of Derby/West Kimberley Administration Office (behind the Derby Visitors Centre)
30 Loch Street Derby WA 6728

If you have any questions, please contact Rates on (08) 9191 0999 and provide your relevant assessment number.

Other Assistance

- To test eligibility for income support payments including JobSeeker contact Services Australia, visit servicesaustralia.gov.au.
- For financial counselling, including advice on managing debt, visit [National Debt Helpline](#) or visit [MoneySmart](#) for advice to help you manage your money.
- Those on a low income may be eligible to apply for a 'No Interest Loan'. For more information and details on how to apply, visit [Good Shepherd Microfinance](#).

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