

Application for deferral of Rates and Charges against Estate



Private and Confidential

Please note this deferral (if approved) is subject to rates and charges not being greater than 20 years overdue as provided by Section 712 of the Local Government Act,1993.

For year commencing 1 July _____

Rate Account number

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Please use BLOCK LETTERS and tick appropriate boxes
All applications received are treated with complete confidentiality

I _____
(Full name in block letters)

of _____
(Address)

Telephone number () _____ Mobile _____

Email _____

Please Note - Interest is charged on deferred Rates and Charges for the 2017/2018 Year at the concessional rate of 3.15% pa.

Do you wish to defer ALL or PART of your annual Rates and Charges?.

(If part, specify the percentage you wish to defer) All Part ____ %

For the purposes of this application, I state the following information which I believe to be correct:

1. Pension / Benefit Details

1. Do you receive any pensions or benefits? Yes No

If Yes, state what pension or benefit you receive and how much you receive per week.

Pension / Benefit	Amount
_____	_____
_____	_____
_____	_____

2. Do you have a current Pensioner Concession Card? Yes No

If Yes, state Card No. _____

Date of grant of card _____

2. Ownership or residency details

- 1. Is this property your sole or principal place of living? Yes No
- 2. Is any part of the property tenanted? Yes No
- 3. Do you own the property
 - a. By yourself? Yes No
 - b. With a spouse? Yes No
 - c. With other person/persons? Yes No

If answers at items (b) and/or (c) is **YES** state name/s and address/es of other owner/s and the proportion of ownership held by each person.

Name	Address	Proportion of ownership

- 4. Is the property owned as shares in a company title? Yes No

5. How many people live at the property? _____.

- Indicate by ticking
- Self
 - Spouse
 - Children - Ages of children? _____
- Other insert number
- Boarders
 - Relatives

- 6. Do you own or have an interest in any other land or buildings? Yes No

If **Yes**, state address/es.

Building / land name	Address

3. Other details

1. How many children do you support _____ State ages _____

2. What is the cause of financial hardship?

3. How long have you been under hardship?

4. Income *State gross fortnightly amount received in dollars and cents.

Income	Amount \$ and cents
1. How much do you receive in pensions and benefits	
2. Other source of income (full-time, part-time, casual etc)	
3. How much do you receive in compensation, superannuation insurance of retirement benefits	
4. Spouse's income (if any)	
5. State income of any other member of the family or other person residing at the property (including pensions or other benefits)	
6. Family allowance	
7. Family maintenance	
8. State name and current balance of any bank, building, credit union savings etc	
9. Interest from banks, credit unions, building societies, investments	

Outgoings

State fortnightly payment, nature of commitment and to whom the amount is owed.

Income	Amount \$ and cents
1. Rent or Home loan	
2. Second and other mortgages	
3. Personal loans/hire purchase (not credit cards or charge cards)	
4. Health costs (where there is serious illness)	
5. Family maintenance payments	
6. Other expenses (food, utilities, credit cards, etc)	

Statutory Declaration

Oaths Act, 1900, Ninth Schedule

I,, do solemnly and sincerely declare that the answers given to questions and other relevant information stated in the pages one (1) to four (4) of the attached Application for Deferral of Rates and Charges against my estate are true and correct in every material particular.

I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Oaths Act 1900.

Declared at: on.../.../...20....
[place] [date] [signature of declarant]

in the presence of a Justice of the Peace, who states:

I,, a
[name of Justice of Peace] [Justice of Peace Registration Number]

certify the following matters concerning the making of this statutory declaration by the person who made it:

[* please cross out any text that does not apply]

1. *I saw the face of the person OR

I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and

2. *I have known the person for at least 12 months OR

*I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was:

.....
[describe identification document relied on]

..... on.../.../...20.....
[signature of Justice of Peace] [date]



Lodging your request for Deferral

By mail:

Interim Chief Executive Officer
Newcastle City Council
P O Box 489
NEWCASTLE NSW 2300

In person:

Newcastle City Council
282 King Street
Newcastle NSW 2300

Email:

mail@ncc.nsw.gov.au

Protecting your privacy

Newcastle City Council is committed to protecting your privacy. We take reasonable steps to comply with relevant legislation and Council's Privacy Management Plan.

Purpose: Council will use this information to determine how it can assist you in paying your rates and charges and confirms you wish to defer your rates and charges against your estate. You are certifying this by a Statutory Declaration.

Intended recipients: Selected officers within Council's Debt Management Team. This team is part of the Finance Business Unit which belongs to the Corporate Services Group.

Supply: The supply of this information is voluntary.

Consequence of Non Provision: Council will be unable to determine if it can assist you in making special arrangements to pay your rates and charges.

Storage and security:

Your information will be stored in the electronic database and will only be available to selected officers in the Debt Management Team.

Access:

Your information can be checked for accuracy by calling the Debt Management Team on 4974 2000.