



FINANCIAL HARDSHIP APPLICATION

If you have any questions about the process, or if you require assistance to complete this application, please contact our office on (02) 9249 4850.

Reference (policy number/claim number/other reference):

Applicant (If there are more than two applicants, please complete an additional application)

	<i>Surname:</i>	<i>Given Names:</i>		
<i>Applicant 1:</i>				
<i>Applicant 2:</i>				
<i>Postal Address:</i>		<i>State:</i>		<i>Postcode:</i>
<i>Contact Number:</i>				
<i>Email:</i>				
<i>Preferred Method of Contact:</i>				

We will use this email address for all written communication unless you advise us otherwise.

Dependants:

<i>Name:</i>	<i>Age:</i>

Do you want to nominate a representative to handle your application on your behalf?

<i>If 'Yes', name:</i>			
<i>Contact number:</i>		<i>Email:</i>	

Hardship Details

Circumstances of hardship

(Please explain the reason for your application)

Nature of assistance

What assistance would you like SLE Worldwide to consider?

- Extension of due date for payment. If so, when will you be able to make payment?
- Paying in instalments. What can you afford, how often and over which period?
- Paying a reduced lump sum. What can you afford?
- Postponing one or more instalments. When will you be able to start/re-start making payment?
- Other (including a combination of the above options or a possible waiver of the debt).
- Please provide details of what you are seeking

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Employment Details

Are you currently employed?

Type:

Employer 1:

Name:		Occupation:	
Contact Person:		Telephone:	
Salary per month:	\$	<i>(please attach a copy of the most recent payslip)</i>	

Employer 2:

Name:		Occupation:	
Contact Person:		Telephone:	
Salary per month:	\$	<i>(please attach a copy of the most recent payslip)</i>	

Employer 3:

Name:		Occupation:	
Contact Person:		Telephone:	
Salary per month:	\$	<i>(please attach a copy of the most recent payslip)</i>	

Financial Details

Income you receive per month apart from salary

Centrelink: <i>(please attach a copy of the most recent Centrelink statement)</i>	\$
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Other (such as rent, investment). Details of other sources of income:

	\$
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	\$
	\$

Rent and/or mortgage payments	\$	Child support	\$
Other loan payments	\$	Motor vehicle expenses (petrol, insurance, lease payments)	\$
Credit card payments	\$	Living costs (telephone, food, clothing, public transport etc.)	\$
Utilities	\$		

Other costs (such as school fees, hospital/medical costs, insurance etc.) Details of other costs:

	\$
	\$

For More Information

More information about the Financial Hardship provisions in the Code of Practice can be found at codeofpractice.com.au/for-consumers/financial-hardship

Free, confidential, independent financial advice is also available to you via Financial Counselling Australia www.financialcounsellingaustralia.org.au or through the National Debt Helpline 1800 007 007.

Declaration

- I/We declare that the information provided is true and correct.
- By submitting this form, I consent to SLE Worldwide recording all information, including any sensitive information that I have provided

Signature: _____

Date: _____

Once you've completed your application, you can send it to us with your supporting documents by email to claimsenquiries@sleworldwide.com.au