## **Financial hardship application**

Please fill out the below form and return to Westpac New Zealand Limited. You can return this via email to **financial\_solutions@westpac.co.nz**; or via post to Financial Solutions, PO Box 934, Shortland Street, Auckland 1140; or through any Westpac New Zealand Branch.

## BRANCHES ONLY: Please ensure you scan and email the completed form to financial\_solutions@westpac.co.nz on day of receipt.

<b>A.</b> Personal Information of applicant	Name FIRST LAST			Date of birth DD / MM / YYY					
	Phone	Mobile		Email					
	Preferred contact method	Phone	Mobile	Email					
	Preferred contact time	Morning	Afternoon	○ Any time					
	Home Address NUMBER & STREET SUBL								
	TOWN/CITY		POSTCO	DE					
	Occupation Current			employment status					
	Dependants? Yes	No	Ages						
	Is this a joint application?	Yes No							
	If yes, please complete sec								
<b>B.</b> Personal information of secondary applicant	Name FIRST LAST		\ST		Date of birth DD / MM / YYYY				
	Phone	Mobile		Email					
	Preferred contact method	Phone	Mobile	Email					
	Preferred contact time	Morning	Afternoon	◯ Any time					
	Home Address NUMBER & STREET		SUBURB						
	TOWN/CITY POSTCO			DE					
	Occupation Current employment status								
<b>C.</b> Reason for applying	What has caused your current financial circumstances?								
	O Loss of job	O Reduced hours	Health reasor	Accident	O Natural disaster				
	O End of relationship	Bereavement	Overcommitte	ed OParental lea	ave				
	Other (please specify)								
	How is this impacting you financially?								

Please complete the following sections to help us to assess your financial circumstances and what assistance we may be able to provide. Missing information may delay our response and decision.

D. Income	How much is coming in? (after tax)	1st Person	2	nd Person	Weekly	Fortnightly	Monthly
	Salary & wages				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Benefits (WINZ/IRD)				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Child support				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Self employed income				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Rental/boarder				$\bigcirc$	$\bigcirc$	$\bigcirc$
E. Assets	What do you own?	\$ Estimated value	Details				
	Property 1		Address:				
	Property 2		Address:				
	Motor vehicle 1		Make/Mode	el/Year:			
	Motor vehicle 2		, Make/Mode				
	Investments & savings	Name of prov					
	Superannuation & KiwiSaver		Name of pro				
F. Expenses	How much is going out?	\$ Expenses			Weekly	Fortnightly	Monthly
	Accommodation (Rent/Board)				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Insurance				Ŏ	Ŏ	Ŏ
	Rates					Ŏ	
	Food				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Transportation				$\bigcirc$		$\bigcirc$
	Power/Gas				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Water				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Phone/Mobile/Internet				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Child care/education				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Child Support				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Medical costs				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Other expenses (paid TV, gym memberships, donations etc)				$\bigcirc$	$\bigcirc$	$\bigcirc$
	Non-Westpac Loan amount/credit facility/overdraft	Provider	Repayments	Frequency	Balance	Limit	
	DESCRIPTION		\$		\$	\$	
	DESCRIPTION		\$		\$	\$	
	DESCRIPTION		÷\$		\$	- <u>+</u> \$	
	Non-Westpac Credit card/store card	Provider	Repayments	Frequency		Limit	
	DESCRIPTION			\$ \$	\$	\$\$	
	DESCRIPTION		\$		\$		
	DESCRIPTION		\$		\$ \$		
	Other (Hire purchase, student loans, tax, etc)	Provider	Repayments	Frequency	Balance	Limit	
	DESCRIPTION		\$	. ,	\$	\$	
					\$	\$	
	DESCRIPTION		\$		ዋ	φ	

) I/We agree to receive all disclosures in relation to this application and any subsequent financial hardship assistance via email at the email address provided in this application form.

) I/We agree for Westpac to perform a Credit Check on my/our behalf.

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angle I/We confirm the details provided are true and correct to the best of my/our knowledge.

🔿 By completing this financial hardship application form I/we acknowledge and agree that I'm/we're permitting Westpac to collect, store, use and share my/our personal information in accordance with Westpac's Privacy Policy. This information will be used only for the purposes of this application.

Signature 1

Signature 2 Date DD / MM / YYYY

What's next? We will be in touch within 5 working days of receiving your application.

## We're here to help.

Date DD / MM / YYYY

If you have any questions, please call 0800 772 771 (+64 9 375 9919 from overseas) weekdays 8am - 6pm. If you have concerns about your finances, MoneyTalks provides free, independent, and confidential budgeting advice. You can contact them on 0800 345 123 or at moneytalks.co.nz.

Westpac New Zealand Limited.