

	Hardship Policy – Rates and Charges	Doc no:	
		Version 1	Date:
Controller:	Approved By:	Review Date	
DCCS	Council Minute No. 2020/105 – 17 July 2020	May 2020	

1. PURPOSE

The purpose of this policy is to provide a framework for assessing and processing requests for financial relief from ratepayers who are suffering substantial financial hardship with the payment of their rates and charges.

2. OBJECTIVE

The objective of this policy is to;

- 2.1 Provide a formal administrative process to objectively determine hardship applications.
- 2.2 Provide relief where possible, in accordance with the Local Government Act 1993 NSW and the Local Government (General) Regulation 2005 NSW, to those ratepayers who are experiencing substantial financial difficulties in paying their rates and charges.

3. RELEVANT LEGISLATION

Local Government Act 1993 NSW

Local Government (General) Regulation 2005 NSW

Valuation of Land Act 1916 NSW

4. PRINCIPLES IN DETERMINING HARDSHIP

- 4.1 Council requires all ratepayers to pay their rates and charges in full by the due date(s). However, some ratepayers experience genuine financial hardship and consequently may request Council to consider alternative arrangements in respect of the timing of their rate payments.
- 4.2 Relief is offered to ratepayers who are experiencing genuine financial difficulties in paying their rates and charges. This relief may take the form of:
 - 4.2.1 Arrangement of a payment agreement or schedules.
 - 4.2.2 Extending the period of time in which the outstanding rates may be repaid.
 - 4.2.3 Reducing or writing off accrued interest.

- 4.3 Each individual case will be considered on its merits. The criteria for assessment will be, but is not limited to, the following:
- 4.3.1 The ratepayer must own and occupy the property as their principal place of residence or business undertaking.
 - 4.3.2 The ratepayer is required to provide Council with details of all income and expenses from all sources, with supporting evidence.
 - 4.3.3 The ratepayer is to provide reasons and reasonable proof of financial hardship.

5 HARSHIP RELIEF

Balranald Shire Council recognises that financial hardship can arise with some ratepayers and will consider applications for financial relief in some instances. It takes into account the principles of fairness, integrity, appropriate confidentiality and its obligations under the Local Government Act 1993 (the Act) and other Acts. Council will not reduce rates or annual charges, but will consider alternative available approaches to dealing with cases of financial hardship.

6. PRIVACY

Council is committed to ensuring that privacy will be maintained in accordance with the principles established under the Privacy and Personal Information Protection Act 1998.

7. PRINCIPLES – RATES & CHARGES

The key principles that will apply to overdue rates and annual charges recovery are:

- 7.1 Council aims to collect all rates and annual charges by the end of each rating year;
- 7.2 A fair and reasonable approach to recovery will apply;
- 7.3 Council will individually assess cases of financial hardship;
- 7.4 Council will not reduce rates or annual charges, but will consider alternative available approaches to dealing with cases of financial hardship;
- 7.5 Council will consider a scheme of periodical payment outside the due dates in cases of hardship or extenuating circumstances such as a National Pandemic;
- 7.6 Council will utilise the services of a registered debt collection agent where required;
- 7.7 Council's Rates Outstanding Ratio aims to remain at or below the industry standard.

8. PROVISIONS

- 8.1. Applications for Hardship Provision – Rates and Charges must be made on the Hardship relief application form available from Council’s website or from any of Council’s offices.
- 8.2. All Hardship Provision – Rates and Charges applications will be determined in accordance with Council delegations and where considered necessary, will be discussed only in a meeting of Council that is closed to the public.
- 8.3. Further information, supporting documentation or an interview with the ratepayer/s may be requested, if considered necessary, to fully understand the issues causing hardship.
- 8.4. All Hardship Provision – Rates and Charges applicants will be advised in writing of Council’s decision within 30 days of receipt of the application.
- 8.5. All applicants have the obligation of informing Council within 21 days of any change in circumstances that may affect ultimate eligibility under the Hardship Provision – Rates & Charges.
- 8.6. All data collected through the Hardship Provision – Rates and Charges process will be dealt with by way of Council’s Privacy Management Plan.
- 8.7. Successful applicants will need to reapply every 12 months for Hardship Relief.

9. VARIATION

Council reserves the right to vary the terms and conditions of this policy, subject to a report to Council.



APPLICATION FOR HARDSHIP RELIEF

Privacy Notification

Balranald Shire Council, for Hardship Relief purposes, is collecting the information requested on this form. The information will be used solely by Council officials for the purpose mentioned or a directly related purpose. The applicant understands that this information is provided on a voluntary basis and they may apply to Council for access or amendment of the information at any time.

My application is for

- a) Entering into a set payment arrangement per week/fortnight/month toward reduction of the outstanding account [Section 564];
- b) Allowing outstanding rates, charges, and interest to accrue against the estate.
- c) Writing off or reducing interest accrued on rates or charges [Section 564 & 567];
- d) Waiving, reducing or deferring the payment of the increase in the amount of rate payable because of hardship resulting from general revaluation of land in the Local Government Area [Section 601];
- e) Waiving, or reducing rates, charges and interest of eligible pensioners. [Section 575, 582]

**Statutory Declaration
Oaths Act 1966 EIGHTH SCHEDULE**

Ido solemnly and sincerely declare
(name of declarant)

that the information contained in this application for hardship relief is true and correct in every respect and 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 _____

Signed _____ Applicant's signature

Date _____

In the presence of an authorised witness who states:

I a
(name of authorised witness) (qualification of authorised witness)

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 justification¹ for not removing the covering, and
2. *I have known the person for at least 12 months OR *I have confirmed the person's identity using an identification document and the document I relied on was

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

.....
[signature of authorised witness] [date]

¹ The only "special justification" for not removing a face covering is a legitimate medical reason (at September 2018)

You should ensure you contact Council promptly if your circumstances change. This will ensure that Council does not take action to recover the amount outstanding if you do not adhere to the arrangement. Additionally you may not be entitled to relief under the new circumstances.

When answering the following questions please use block letters

Name:.....

Address:.....

Postal Address:.....

Telephone: Home:.....

Work:.....

Mobile:.....

Email:.....

Property Address:.....
(if different to above)

Financial Statement

INCOME (weekly unless otherwise stated)

Your average weekly income after tax from salary or wages \$ _____
Spouse average weekly income after tax from salary or wages \$ _____
Your Social Security benefits/pensions (include family payments etc) \$ _____

Pension Number: _____ Type _____

Health Benefit Card No: _____

Spouse Social Security benefits/pensions (include family payments etc) \$ _____

Pension Number: _____ Type _____

Health Benefit Card No: _____

Other Income \$ _____

Do you collect any rent from interest you have in other properties? Y/N \$ _____

TOTAL \$ _____

EMPLOYMENT DETAILS

What is the name of your employer? (

What is the address of your employer?

SUBURB

POSTCODE

Is your salary or wage paid by your employer into an account in a bank or financial institution?

If you answered yes to the previous question, identify the institution, branch, BSB and account number.

Are your employment options suffering due to COVID19 Pandemic?

BUSINESS OWNERSHIP DETAILS

Please state the name of your business and the ABN number

What is the address of your business?

SUBURB

POSTCODE

Please identify the institution, branch, BSB and account number for your business banking

Is your business suffering economic downturn due to COVID19 Pandemic?

PROPERTY OWNED BY YOU

CURRENT VALUE

Home	PROPERTY ADDRESS	\$
	VALUE OF EQUITY, IF ANY \$	
Other property	PROPERTY ADDRESS	\$
	VALUE OF EQUITY, IF ANY \$	
Do you own the Property	<input type="checkbox"/> By Yourself <input type="checkbox"/> With another person <input type="checkbox"/> Other – Please give details	
Is the property	<input type="checkbox"/> Residential Home <input type="checkbox"/> Vacant Land <input type="checkbox"/> Rural Land <input type="checkbox"/> Other – Please give details	
Funds in banks/ financial institutions, including funds held in off-set accounts	INSTITUTION, BRANCH, BSB AND ACCOUNT NUMBER	\$
	INSTITUTION, BRANCH, BSB AND ACCOUNT NUMBER	\$
Investments	NAME AND TYPE OF INVESTMENT	\$
Motor vehicle	YEAR MAKE	\$
	MODEL REGISTRATION NO	
Household contents		\$
Other personal property	DESCRIPTION AND LOCATION	\$
TOTAL VALUE OF PROPERTY OWNED BY YOU		\$

EXPENSES

Average weekly expenses:

Other liabilities:

ITEM	WEEKLY AMOUNT
Food	\$
Household supplies	\$
Mortgage/rent	\$
Gas	\$
Electricity	\$
Heating fuel	\$
Rates/levies	\$

LIABILITIES	NAME OF BANK/INSTITUTION	TOTAL AMOUNT OWED
Home mortgage		\$
Other Mortgage		
Other loans		\$
Credit cards		\$
Credit cards		\$
Other liabilities (specify)		\$
TOTAL		\$

Telephone	\$
Motor vehicle	
• Petrol	\$
• Maintenance	\$
• Registration/insurance	\$
Medical/hospital funds	\$
Other insurance (specify)	\$
Fares	\$
Clothing and shoes	\$
Entertainment/hobbies	\$
Education/childcare expenses, including fees and levies	\$
Medical/chemist /pharmaceutical	\$
Hire purchase payments	\$
Credit cards	\$
Other necessary commitments, including weekly payments on other liabilities, listed above (specify)	\$
TOTAL WEEKLY EXPENSES	\$

Does anyone contribute to paying these liabilities (eg your spouse/partner)? Yes No

If yes, give the person's details:

Name of person	
Amount of contribution per week	

Do you have any dependants? Yes No

If yes, give details:

ADDITIONAL QUESTIONS REGARDING FINANCIAL CIRCUMSTANCES

Is your current income affected by the COVID19 Pandemic?

If yes, please indicate if you have applied for any government assistance (Jobkeeper etc)

What arrangements are you prepared to make to pay this debt?

DOCUMENTS TO BE PRODUCED

Copies of the following documents must be attached to this hardship application:

Payslips for the last 4 weeks OR Current Pension or Health Benefit card

Tax return for the year ending June 2019.

Current bank statement for any accounts held by you.

Current statements for any credit cards or loans in your name.

Proof of economic hardship due to COVID19.

The information provided in this application is strictly confidential and will not be disclosed to any other organisation.