E-FH01-0224

Application for financial hardship based on unforeseen circumstances



Applicant one - c lient information Applicant two - c lient information			
Client number		Client number	
Personal detai	ls	Personal details	
Gender	Title	Gender Title	
Full name		Full name	
First		First	
Middle		Middle	
Surname		Surname	
Preferred name(s)		Preferred name(s)	
Maiden/previous name(s)		Maiden/previous name(s)	
Date of birth	Day Month Year	Date of birth Day Month Year	
Relationship status	eg, single, married, de facto, divorced	Relationship status eg, single, married, de facto, divorced	
Living situation	eg, owner-occupier, renting, boarding or flatting, living with relatives, other	Living situation eg. owner-occupier, renting, boarding or flatting, living with relatives, other	
Employment status	eg, full time, part time, self-employment, retired, other	Employment status eg, full time, part time, self-employment, retired, other	
Number of depender	nts Ages	Number of dependents Ages	
Contact details	s	Contact details	
Address (residential)		Address (residential)	
Street address		Street address	
Suburb		Suburb	
Town/city	Postcode	Town/city Postcode	
Are you a citizen/per	manent resident of New Zealand?	Are you a citizen/permanent resident of New Zealand?	
Yes No, I'r	n a resident of	Yes No, I'm a resident of	
Phone number	Туре	Phone number Type)
Email	Туре	Email Type	
Preferred method of contact Phone Email Preferred method of contact Phone Email			
Do you have KiwiSav	er? Yes, I contribute % No	Do you have KiwiSaver? Yes, I contribute %	lo
Do you have a studer	nt Ioan? Yes No	Do you have a student loan? Yes N	lo

Reason for application

Reason see common circumstances below, please detail.

Other if your circumstance is not listed below, please detail.

Attach evidence to support your claim. Suggested evidence may include, but is not limited to, the following:

Circumstance	Evidence
Serious illness	Medical certificate
Termination of employment	Employment termination notice letter from employer
Family breakdown	Proof of separate residential addresses, parenting agreement or support payment
Other	Relevant documents as required

NB: You cannot apply if a) you are in default more than two months, or b) you have missed four or more consecutive payments, or c) the hardship was reasonably foreseeable at the time of entering into the contract. NBS may also request further financial information from you.

Please describe how the unforeseen event has affected your financial ability to meet your repayment commitments.

What steps have you taken to address your financial difficulties? Including approaching other lenders to reduce their commitments as well.

What financial arrangements would assist you to meet your commitments?

Do you have any insurance cover? Have you attempted to claim on those? *Income insurance, work interruption insurance or trauma etc?*

Have you advised the guarantor or guarantors? (if applicable)

Note: Combine liabilities and assets for joint applicants.

Statement of position - liabilities						
	Lender	Limit	Amount owing	Interest rate	Regular repayments	Frequency
Home loans						
Other loans						
Overdraft						
Other finance	Туре					
Consumer loans	lssuer/provider					
Credit cards						
Store cards						
Total liabilities (/	Α)					

Statement of positior	n - assets
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	Address		Market value
Properties			
	Make/year/model		Current value
Motor vehicles			
	Description		Current/market value
Other assets eg, shares, art,			
boat, caravan etc			
Bank deposits Superannuation KiwiSaver/private			
Total assets (B)			
Less total liabilities (A)		Surplus (B-A)	

Note: Combine liabilities and assets for joint applicants (as if the loan is approved)

Statement of position - expenses

Monthly debt outgoings	Monthly living expenses		
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Loans	Food and groceries including eating out/takeaways		
Credit cards/store cards	Power, gas and heating		
Revolving credit	Water		
Overdraft	Phone/internet		
Other	Other school expenses		
Fixed monthly expenses	Personal care eg, hair, gym		
	Motor vehicle and transport		
Rent or board	including fuel, WOF, taxi, bus		
House insurance	Healthcare		
Contents insurance	Childcare		
Contents insurance			
Vehicle insurance	Other		
Life insurance	Ongoing recurring monthly expenses		
Health insurance	Entertainment eg, Sky, streaming service		
Other	Savings including non-KiwiSaver Super		
Body corporate	Donations/tithing		
School fees	Student Ioan Voluntary repayments		
Child support	Child support Voluntary repayments		
Leasehold fees	Other		
Rates			
Other fixed expenses	Total expenses (C)		

Income		
Gross annual income		
Applicant one	Applicant two	
Monthly income		
Net monthly pay	Applicant one	Applicant two
Monthly business income		
Monthly interest		
Monthly dividends		
Monthly taxed benefits eg, Superannuation		
Monthly untaxed benefits eg, Working for Families		
Monthly rent received		
Monthly board received		
Other		
Total net monthly income		
Total combined income (D)		
Less total expenses (C)		
Uncommitted income (D-C)		

Client declaration

l/We...

certify all information provided in my or our application for financial hardship assistance (application) is true, correct and complete in every respect.

understand if the information provided is not true, or misleading, my or our application may be declined.

acknowledge all applications for finance (including my or our application) are subject to Nelson Building Society (NBS) lending criteria, including NBS' responsible lending obligations under the **Credit Contracts and Consumer Finance Act 2003.**

agree to be bound by any conditions set out in any finance application or request (including my or our application) either written or oral, which may be in addition to any other conditions already imposed by NBS.

authorise NBS to obtain information and make such enquiries NBS may consider necessary to determine whether or not to approve my or our application, including contacting any party to verify the information that I or we have provided (including, but not limited to, Ministry of Justice overdue court fines, my or our employer, doctors or medical advisers, credit reporting agencies, or third party service providers).

authorise any party (including, but not limited to, Ministry of Justice overdue court fines, my or our employer, doctors or medical advisers, credit reporting agencies, or third party service providers) to provide my or our personal information to NBS for the purposes of verifying the information that I or we have provided in my or our application.

authorise NBS to disclose my or our relevant personal information (including default information) to such credit reporting service providers or to any person or third party NBS may appoint to collect any outstanding debt.

also understand that such credit reporting service providers will use the information provided to them by NBS, to update their credit reporting data bases and may disclose any information they hold on me or us to their own clients. NBS may also use the credit reporting service provider's monitoring service to receive updates, if any, of the information it holds about me or us now and in the future at NBS' discretion.

authorise NBS to use and share my or our relevant personal information to third party service providers, while I or we am or are a client(s) and for a reasonable time afterwards, for the purpose of conducting market research and analysis about the NBS brand, offers, products or services.

authorise selected third party providers to present me or us with advertisements, client feedback surveys and products or services that NBS believe may be of interest to me or us.

understand that NBS will collect, use, share and store my or our personal information for the purposes for which it was provided.

understand that NBS will collect and use my or our personal information:

- to give me or us products or services
- to improve NBS products and services, analyse data and generate insights
- for security reasons or investigations
- to comply with the law

understand that I or we do not have to provide NBS with my or our information, but this may affect my or our application, and the products or services that NBS can provide me or us.

authorise NBS to use all information they hold about me or us now or in the future to make available to me or us the full range of financial products and services offered by NBS.

understand that I or we have the right to access and correct my or our personal information subject to the provisions of the Privacy Act 2020.

For further information regarding how NBS will store and use my or our personal information, please see NBS' Privacy Statement.

Full name	
Date	
Signature	
Full name	
Date	
Signature	

Submitting your form

When you have completed all details in the form please:

Email to lending@nbs.co.nz or

Post to NBS, PO Box 62, Nelson 7040 Attention: Credit Manager



Head Office 111 Trafalgar Street, Nelson Post PO Box 62, Nelson 7040 Freephone 0800 101 700 Email lending@nbs.co.nz