

Application for Financial Hardship

Based on Unforeseen Changes



Loan Number

Client Number

Title Full Name

Phone Number - Daytime

Phone Number - Home

Phone Number - Mobile

Email

Residential Address

NUMBER & STREET	SUBURB
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TOWN/CITY	POST CODE	COUNTRY
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Client Number

Joint Applicant Information

Title Full Name

Phone Number - Daytime

Phone Number - Home

Phone Number - Mobile

Email

Residential Address

NUMBER & STREET	SUBURB
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TOWN/CITY	POST CODE	COUNTRY
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Are you applying because of?

Serious Illness or Injury

Termination of Employment

Family/Relationship Breakdown

Other

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 must not be in default more than 2 months and have not missed four consecutive payments **b)** 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 commitment

Three empty text boxes for describing the unforeseen event's impact.

What steps have you taken to address your financial difficulties?

Three empty text boxes for describing steps taken to address financial difficulties.

What financial arrangement would assist you to meet your obligations?

Three empty text boxes for describing financial arrangements to meet obligations.

Do you have any insurance cover? (Income Insurance, Work Interruption Insurance or Trauma etc?)

One empty text box for insurance cover information.

Have you advised the guarantor (if applicable)

One empty text box for guarantor advice information.

Income & Expenses

Current Monthly Budget - Repayments

Table with 2 columns: Category and Amount (\$). Rows include Home Loan, Other Loans (eg. Personal), Credit Card(s), Store Card(s), and Hire Purchase.

Living Expenses

Table with 2 columns: Category and Amount (\$). Rows include Motor Vehicle (WOF, Fuel), Utilities (Power, Phone), Rates (Land & Water), Insurance Costs, and Household (Food, Doctor).

Other Expenses

Table with 2 columns: Category and Amount (\$). Rows include Life Insurance, Board/Rent, Child Care/Child Support, and Total Expenses (C).

Income

Table with 3 columns: Category, Applicant, and Joint Applicant. Rows include Gross Annual Income, Net Monthly Pay, Rent Received, Family Support, and Other.

Summary rows for Total Net Monthly Income, Total Combined Income (D) =, Less Monthly Expenses (C), and Uncommitted Income (D-C).

Rows for No. of Dependents and Age of Dependents.

This information is collected to enable calculation of uncommitted income.

Declaration

I/we solemnly and sincerely declare that the information provided in this financial hardship form is true and correct.

Full Name: _____

Date DD/MM/YY: _____ Signature: _____

Full Name: _____

Date DD/MM/YY: _____ Signature: _____

Submitting your form

When you have completed all details in the form please either:

Email to: garry@nbs.co.nz or Post to: NBS, PO Box 62 - Nelson 7040. Attention: Credit Manager