

Complete this form **only** if you are applying for rate relief under Section 182 of the *Local Government Act 1999* or Council's [Rates Hardship Policy](#).

Please Note: Completion of this form does not automatically grant approval, you will receive written confirmation of your application. All payment arrangements made with Mid Murray Council will be monitored regularly.

Return completed form to:

Post:	Mid Murray Council, PO Box MANNUM SA 5238
Email:	postbox@mid-murray.sa.gov.au
In person:	49 Adelaide Road, Mannum Main Street, Cambrai Cnr Fourth & Eighth Street, Morgan

1. Applicant Name/s

Applicant Surname			Other Names		
Property Details	Assessment No.	A	Valuation No.		
	Street				
	Town/Suburb			Postcode	
Property Ownership type	Private	Sole <input type="checkbox"/>	Joint <input type="checkbox"/>	Multiple <input type="checkbox"/>	
	Other	Corporation <input type="checkbox"/>	Business <input type="checkbox"/>	Superannuation <input type="checkbox"/>	
Name on Rates Notice					
Postal Address (if different to above)	Street				
	Town/Suburb		State		Postcode
Contact Phone			Email		
Balance of Rates Outstanding	\$		As at date		

2. Application Details

I am a registered owner of the property as listed above		Yes <input type="checkbox"/>	No <input type="checkbox"/>
I am the spouse (or specify other) of the owner of the property		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If other, please specify			
Is the property listed above your principal residence?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have interest in any other properties? (attach details)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Employment details (please select)	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	
	Permanent <input type="checkbox"/>	Casual <input type="checkbox"/>	
	Self Employed <input type="checkbox"/>	Unemployed <input type="checkbox"/>	
	Retired <input type="checkbox"/>	Other (specify):	
Do you hold or have you applied for a State Government Concession?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
List Government Concession Card (if applicable)			
List Government Pension (if applicable)			
How long have you owned the property?		Over 10 years <input type="checkbox"/>	
		Over 3 years but less than 10 <input type="checkbox"/>	
		Less than 3 years <input type="checkbox"/>	
How many dependent children do you have?			
<p>Complete page 2 and attach any supporting evidence relating to your application (ie. letters of recommendation from a financial adviser).</p> <p>Free financial advice can be obtained by calling the National Debt Helpline on 1800 007 007</p>			

3. Household Income and Expenditure Statement

Please complete the following fortnightly household income and expenditure statement (**not required if a report is provided by a financial advisor**).

Income (fortnightly)	
Salary or wages	
Pensions or annuity income	
Other Government Payments	
Rental income	
All other income	
Total fortnightly income	
Expenditure (fortnightly)	
Mortgage	
Car	
Food	
Fuel	
Power (gas/electricity)	
Water	
Council Rates	
All other expenditure	
Total fortnightly expenditure	
Net fortnightly income/expenses	

4. Proposed Payment Arrangements

Due date of extension		
Regular repayments of	\$	per / week <input type="checkbox"/> fortnight <input type="checkbox"/> Month <input type="checkbox"/>
Date of first payment		
Date of last payment		
Notes: Quarterly instalment notices will continue to be issued to you during the term of this agreement. If you require assistance or an amendment to this arrangement, please contact Council's Rates Assessment Officer on 8569 0100. While legal action is not taken for properties with a payment arrangement, failure to keep an arrangement may result in the placement of your account with a debt collection agency. This action will incur additional costs which will be added to your outstanding amount.		

5. Important Information

It is an offence for a person or body to make a false, misleading statement or representation in an application or to provide false or misleading information or evidence in support of an application made (or purporting to be made) under the *Local Government Act 1999*.

Properties owned in the names of corporations, businesses, superannuation funds or other entities and properties that are not the principal place of residence may not be entitled to hardship provisions.

6. Applicant's Signature

Name (Please Print)			
Signature		Date	

Office Use Only –

Applicant Interviewed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date		Initials	
Supporting document received	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date		Initials	
Letter of outcome sent	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date		Initials	