

# Hardship - Repayment Variation

To : MyState Date

Customer(s) No.(s)

Loan(s) Contract No.(s)

I / We  Name of debtors(s)

am/are unable to meet my/our obligations under the loan contact due to:

Illness. The illness of  and attach a medical certificate given by  outlining the nature of the condition and its expected consequence on employment prospects.

**Please enclose copy of doctors certificate**

Unemployment Unemployment of  the details of the unemployment being

**Please enclose copy of Employment Separation Certificate or Centrelink Confirmation of unemployment**

Any other reasonable cause

**Please enclose supporting documentation**

Arrangements made with other Credit Providers

Credit Provider	Arrangements Made
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>

Please enclose supporting evidence of arrangements approved

Do you have consumer credit insurance for the loan/s  Yes  No

Life Cover  Cash Assist/Trauma  Sickness and Accident  Unemployment

# Hardship - Repayment Variation

## Statement of Financial Position

Date	Name(s)				
Address				Postcode	
Applicant 1 Phone #		Applicant 1 Email Address			
Applicant 1 Occupation		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Years There	
Applicant 1 Employer					
Applicant 2 Phone #		Applicant 2 Email Address			
Applicant 2 Occupation		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Years There	
Applicant 2 Employer					
No. of Dependants	Ages	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### To be fully completed

Assets	Value \$	Liabilities	Amount Owning
House(s) Located At (address)		Mortgage(s) (specify where held)	
Land Located At (address)		Personal Loan(s) (specify who with)	
Motor Vehicles (type & year)		Hire Purchase/Store Credit (specify who with)	
Furniture (insured value)			
Savings (specify where held)		Credit Cards (specify who with & limit)	
Other Assets (detail)		Other Liabilities (provide full details)	
<b>Total Assets</b>		<b>Total Liabilities</b>	

Please enclose latest statements for all liabilities

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## Income & Expenditure

Net Monthly Income	\$	Monthly Expenses	\$
Salary Applicant 1		House Mortgage Repayment	
Salary Applicant 2		Other Mortgage Repayments	
<b>Government Assistance</b> (specify)		Rent	
		Personal Loan Repayments (details as per liabilities)	
Rental Income (detail)		Hire Purchase/Store Credit (details as per liabilities)	
Other (detail)		Credit Cards (details as per liabilities)	
		Estimated Living Expenses (As Per HPI)*	
		Mobile Phones	
		School Fees	
		Pay TV	
		Memberships	
		Other Payments	
		Other Liabilities (details as per liabilities)	
		Additional Motor Vehicle Costs	
		Childcare Expenses	
<b>Total Monthly Net Income</b>		<b>Total Monthly Expenses</b>	

\*MyState to complete.

Please enclose evidence of all income - Latest payslips, bank statements, centrelink statements, etc.

For credit cards, monthly repayment is to be assessed at 3% of the approved limit.

# Hardship - Repayment Variation

I / We

(name in full)

do sincerely state that the answers in the foregoing statement of financial position are true and complete in every particular and that I have attained the age of 18 years.

I / We request that MyState vary the terms of the loan by:

Reducing the amount of repayments to

Postponing payments due under the loan contract until

Postponing payments due under the loan contract until

and by reducing the amount of repayments to

I / We believe that if requested variation is allowed, I/we will be able to meet my/our varied obligations under the loan contract.

I / We understand that if the requested variation is allowed it may have the effect of extending the term of the loan contract.

I / We give my/our consent to MyState verifying the above details with the persons referred to above or with a representative of such a person.

I / We have read and agree to the collection, uses and disclosures of my personal information as set out in the separate brochure - 'Privacy Policy'.

I / We agree to receive documentation in relation to this application via the email address provided with this application.

Signature

Date

Signature

Date

Signature

Date

Signature

Date

Note: If Loan/s are in joint names both applicants must sign this application. Should loan/s be secured by a guarantee, all guarantors must also sign this application.

## Office Use Only

### Accepting Officers Additional Comments To Support Request

# Hardship - Repayment Variation

## Variation Check List (Branch use only)

### Branch Check List

- Hardship Repayment Variation Application fully completed
- Hardship Repayment Variation Application been signed by all parties to the loan including guarantors and signatures confirmed
- Doctors Certificate provided if reason for hardship is on medical grounds
- Employment Separation Certificate or Centrelink Confirmation of Unemployment attached if reason for hardship is due to loss of employment
- Other supporting documentation to confirm eligibility for hardship provided (confirmation of change of hours, unexpected bills etc)
- Confirmation of arrangements with other Credit Providers provided
- Consumer Credit Insurance cover checked and application form provided where appropriate
- Latest statements of all liabilities provided
- Latest payslips, Centrelink benefits statement, bank statements confirming all current income provided
- Other pertinent information to support application detailed/provided
- Signature/s verified

# Hardship - Repayment Variation

## Operations Collections Checklist

- All necessary documentation provided and attached  
 Application form fully completed with supporting commentary from branch submitting application.

Loan purpose  Product Code

Funding date  Broker  Yes  No

Prior hardship  Yes  No  If yes details

Loan term to be extended  Yes  No  If yes new expiry date

Repayments to be changed  Yes  No  If yes new repayment amount \$

Old repayment amount \$

Note: Attach applicable hardship variation repayment calculation

LMI Cover  Yes  No If yes policy number   GE

QBE

If yes LMI approval held and attached  Yes  No

Packet Number/s

Collateral value \$  LVR %

Valuation date  Valuer

Advanced payments  Yes  No  If yes \$

Reduce advanced payments  Yes  No  If yes \$

Arrears value \$  Loan amount \$

Arrears to be carried  Yes  No  Interest rate %

Months payments defered

Next Due Date

# Hardship - Repayment Variation

## Collection Check List (continued)

Approval recommended  Yes  No

Comment if any

Signature

Date

Name

## Hardship Credit Check List

Reason for hardship genuine

Application meets hardship criteria/policy

Approved as submitted

Declined

Approved with variation - detail

Comment if any

Signature

Date

Name

Forward application and all supporting documentation to Operation Securities.

**Note: Where there are two loans on application an additional copy is required to be sent to operations securities.**

## Operations Collections

Restructure Code Loaded