



# FINANCIAL HARDSHIP

APPLICATION FORM

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Aircrew Insurance is a Business Name of Strategic Underwriting Pty Ltd (ABN 71 619 739 212 AFSL 554 636), referred to as 'Aircrew Insurance', (we, 'us', or 'our' in this form).

We appreciate there are times when circumstances beyond your control can make it difficult to meet all your financial commitments. If you're struggling to make a payment to us, please let us know as soon as possible:

## **Aircrew Insurance**

Level 18, 324 Queen Street

Brisbane QLD 4000

Telephone: 1300 089 847

Email: [support@aircrewinsurance.com.au](mailto:support@aircrewinsurance.com.au)

Follow the steps below to make a financial hardship application and we'll consider any financial issues you're experiencing.

## INSTRUCTIONS

Please read this Financial Hardship Application fully prior to answering the questions.

- Please ensure that this Application is fully completed.
- If there is insufficient space provided to fully answer any question, please attach an additional sheet of paper with the extra information as required.
- Please attach all supporting documentation.
- All attachments form part of this Application Form and are subject to the Declaration.
- The acceptance of this Application Form does not constitute a waiver of our rights.

Note: 'Financial Hardship' means you are having difficulty meeting your financial obligations.

If you owe money and you experience Financial Hardship, you can apply to Aircrew Insurance for assistance. The following information will be of use to us in assessing your request for Financial Hardship assistance. Depending on the circumstances of your request, we may ask you to provide further information.

**Please note:** Financial Hardship support does not apply to unpaid general insurance premiums.

## **FOR MORE INFORMATION**

Free, confidential, independent financial advice is also available to you through the National Debt Helpline: **1800 007 007**. Further information and access to online chat with a Financial Counsellor can be obtained at the National Debt Helpline website [ndh.org.au](http://ndh.org.au).

## Section 1 – Applicant details

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Surname:

First name(s):

Postal address:

Occupation:

Employer:

Employment Status:                      Full-Time                      Part-Time                      Self-Employed                      Unemployed

If you would like to nominate a representative to handle your application on your behalf, include their details as well.

Representative:

## Section 2 – Financial details

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### Income you receive per fortnight

If any of the income you receive is paid monthly, please calculate what it is per fortnight as per list below:

Wages after tax:	\$
Centrelink benefits (Family Allowance, Jobstart or other):	\$
Rent received:	\$
Other:	\$
<b>Total income per fortnight (A):</b>	\$

### Expenses you pay per fortnight

For expenses paid monthly, please calculate what is payable per fortnight as per list below:

Rent and/or mortgage payments:	\$
Other loan payments:	\$
Credit card payments:	\$
Motor vehicle expenses (petrol, insurance, lease payments):	\$
Living costs (food, public transport, telephone etc):	\$
Other:	\$
<b>Total expenses per fortnight (B):</b>	\$
<b>Total expenses per fortnight (A – B):</b>	\$

## Section 3 – Hardship details

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Please provide a description of your financial circumstances and your situation with your insurer, and why you are requesting assistance for Financial Hardship.

## Section 4 – Nature of assistance

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What assistance would you like us to consider?

- a) Extension of due date payment. When will you be able to make payment?
  
- b) Paying in instalments. What you can afford and when?
  
- c) Paying a reduced lump sum. What can you afford?
  
- d) Postponing one or more instalments. When will you be able to make payment?
  
- e) Other (including a combination of the above options).

Please provide details of what you are seeking.

The following documents may assist your application, if they are relevant to your application and you choose to attach them:

### Financial Situation

- Payslips;
- Bank notice re: unpaid overdraft or repossession of mortgaged property;
- Eviction notice;
- Copies of unexpected bills/payments;
- Pending disconnection of essential services;
- Letter from former employer confirming loss of employment;
- Letter from charitable organisation re loss of employment or inability to provide for basic necessities  
Repossession notice of essential items, eg car, motorcycle
- Funeral expenses;
- Notice of impending legal action.

### Medical Situation

- Letter from doctor confirming inability to earn income due to disability, injury, illness or caring for sick family member;
- Overdue medical bills.

**PLEASE NOTE:** For privacy reasons, if any of the documents you provide contain any government identifiers such as Tax File Number etc. please blank these out before sending.

## Section 5 – Our privacy policy

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We comply with the Privacy Act 1988 (Cth), the Australian Privacy Principles and any other applicable privacy regulations regarding the collection, storage, use and disclosure of “personal information” as defined under the Privacy Act 1988 (Cth). Our Privacy Policy outlines how we may collect, store, use and disclose your personal information. If you require a copy of our Privacy Policy, please visit [www.aircrewinsurance.com.au](http://www.aircrewinsurance.com.au).

## Section 6 – Declaration

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I/We declare that:

- I have read and understood the Important Notices on this Application Form.
- The answers and information given in this Application Form are true and correct in all respects.
- I/We have read the Aircrew Insurance Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement.
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Aircrew Insurance Privacy Statement.

Signature:

Full Name:

Date: