

Hardship Assistance Application Form

WarehouseMoney

Send your completed form to: info@warehousemoney.co.nz or SBS Money Limited, PO Box 1204, Invercargill 9840

➔ Your details

First name

Last name

Last 4 digits of your credit card number

Customer number Account number

Mobile number

Email

➔ Your liabilities, expenses, and income

Debts

	Total owed	Monthly repayment
Mortgages	\$	\$
Personal loans	\$	\$
Car loan	\$	\$
Hire purchases	\$	\$
Credit cards	\$	\$
Store cards	\$	\$
Bank overdrafts	\$	\$
Other debts	\$	\$
Total	\$	\$

Your monthly expenses

	Monthly expenses
Rent/Board	\$
Household groceries	\$
Clothing and entertainment	\$
Transportation	\$
Utilities/Rates	\$
Insurance	\$
Childcare/Child support	\$
Healthcare/Education	\$
Other (please describe)	\$
Total	\$

Your income

	Monthly income after tax
Salary/Wages from all jobs	\$
Overtime/Commission/Bonus	\$
Benefit/Superannuation/Child support	\$
Rent/Board received	\$
Total Monthly Income	\$

Other

	Total value
Term deposits	\$
Cash in savings account	\$
Cash in current account	\$
Other (please describe)	\$
Total	\$

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➔ What has changed

What is the most relevant change that has happened to affect your financial situation?

- Unemployment/Redundancy Separation Reduction in income
 Illness/Injury to you Illness/Injury in the family Death in the family Other

Please tell us how your financial situation has changed and why you can't make your credit card repayments anymore. Please attach supporting documents.

➔ How can we help?

What can we do to help you?

- Reduce the amount that you repay each month
 Stop repayments for an agreed time
 Combine the two options stated above

Looking at your expenses, how much money could you put towards repaying your credit card debt each month?

When will you be able to increase your credit card repayments so you can pay the standard minimum amount due each month?

➔ Declaration

I declare that the information given on this form is true and correct and that I authorise SBS Money Limited to conduct relevant checks and verification to process this application.

Print full name

Authorised signature

Date

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