Raine&Horne.

Tenant Financial Hardship Application

Tenancy

Tenant Name(s)

Address

Number of Adults ☐ Number of Dependents ☐

Change in Circumstances

☐ My employment has been terminated — Please complete Section 3 - "*Employment Hardship*"

☐ I have been forced into isolation — Please complete Section 4 - "*Isolation Hardship*"

☐ I have had my hours and/or income significantly reduced — Please complete Section 5 - "*Income Hardship*"

☐ I am a business owner and my income has reduced — Please complete Section 6 - "*Business Hardship*"

☐ Other:

Employment Hardship

☐ My employment has been terminated

Employer

Position

Last Work Day

Please see over for details of supporting documents required.

Isolation Hardship

☐ I have been forced into isolation

Since (Date) Until (Date)

I will be returning to work on

Please see over for details of supporting documents required.

Income Hardship

☐ I have had my hours and/or income significantly reduced

Employer

Position

My hours have reduced from hours per week to hours per week.

My income has reduced from $ per week to $ per week.

Please see over for details of supporting documents required.

Business Hardship

☐ I am a business owner and my income has reduced

Business Name Industry

Accountant Phone

Has your industry been required to cease trading by the Government? Yes ☐ No ☐

Last Day Open

Please see over for details of supporting documents required.

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Financial Request

The form of assistance we request is:

☐ Rent Reduction

Current Rent $ _____ per _____

Proposed Rent $ _____ per _____

☐ Rental Payment Plan

Pay an additional $ _____ per _____

For a total of _____ payments

Documentation Required

As part of your application, we will require you to supply the following documents:

Employment Hardship

☐ A letter of termination or separation from your employer

☐ Copies of your three most recent payslips

☐ A copy of your last bank statement or a statement download for last thirty (30) days

Isolation Hardship

☐ Copies of your three most recent payslips

☐ A copy of your last bank statement or a statement download for last thirty (30) days

Income Hardship

☐ A letter of confirmation from your employer

☐ Copies of your three most recent payslips

☐ A copy of your last bank statement or a statement download for last thirty (30) days

Business Hardship

☐ A copy of your last business bank statement or a statement download for last thirty (30) days

☐ A copy of your last personal bank statement or a statement download for last thirty (30) days

☐ A copy of your last business tax return

Declaration

I/We confirm that we are in true financial hardship and that all options for financial aid have been exhausted, and make a declaration that my/our financial position has been adequately portrayed within this application.

I/We understand that until such a time that a financial hardship request has been approved, the rent owing for our tenancy will remain due and any outstanding payments will continue to accumulate.

By providing this information & documentation, you acknowledge that this material may be passed onto third parties including, but not limited to, the landlord and their its/legal & financial advisors, banks, mortgagee(s), Government & State agencies.

By submitting this application, you also acknowledge that any decision in relation to the request for rental payment assistance lies solely with the landlord and not the agent. In the event that your financial circumstances change (for instance, if you secure employment or receive further financial assistance from the Government or a third party (including, without limitation, the Job Keeper payment), you acknowledge that you will immediately report this to the Agent. In this event, the landlord reserves the right to cancel and/or vary the terms of any rental payment assistance that has been agreed.

The parties acknowledge that this agreement cannot be varied without express agreement in writing by both parties.

Tenants Signature _____ Date: _____

Application Received: / /

Application Approved: YES / NO (Please circle)

Agent Signature: _____ Date: _____