

## FINANCIAL HARDSHIP FORM

Tenant Details			
Tenant Code			
First Name			
Last Name			
Property Address			
Preferred Phone Number			
Email Address			
Current Weekly Rent		\$	
Reason for Hardship Application			
I would like to request a payment plan		Yes    No	
Amount you can pay		\$	
Frequency		Weekly    Fortnightly    Monthly	
Supporting Documentation			
Supporting document #1			
Supporting document #2			
Signed		Date	

## For office use only

### FINANCIAL HARDSHIP REVIEW

Hardship Application received date:				
Hardship Application approved	Yes		No	
Reason for approval/non-approval				
Name:				
Position				
Signature of Approver:				

SR raised to Finance to adjust rent	By:		Date:	
Notification Advice to tenant sent	By:		Date:	
Notification added to tenant file	By:		Date:	