Financial hardship application

QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239 545



If you have any questions about the process, or if you require assistance to complete this application, please contact our Customer Care Unit on 1300 650 503 (Office hours Monday to Friday, 9am to 5pm AEST except public holidays - Calls from mobiles, public telephones or hotel rooms may attract additional charges).

Reference (policy number/claim number/other reference)	
Please complete all sections	

μ	lease	comp	ete al	sections.	

Applicant (If there are more than two applicants, please complete an additional application.)

	Surname				Given name(s)				
Applicant 1									
Applicant 2									
Postal address						State		Postcode	
Preferred contact number			Email						
	We will use thi	is email addres	s for all w	ritten communication unl	ess you advise u	s otherwis	e below		
Preferred Method of Contact	Phone	Email	Post						
	Name								Age
Dependants									
Do you want to nominate a rep	resentative to	o handle your	rapplicat	tion on your behalf?	No Yes				
lf 'Yes', name									
Preferred contact number			Email						

Hardship details

Circumstances of hardship

Please explain the reason for your application

Nature of assistance

What assistance would you like QBE to consider?

- Extension of due date for payment. If so, when will you be able to make payment?
- Paying in instalments. What can you afford, how often and over which period?
- Paying a reduced lump sum. What can you afford?
- Postponing one or more instalments. When will you be able to start/re-start making payment?
- Other (including a combination of the above options or a possible waiver of the debt).

Please provide details of what you are seeking

Employment details								
Employed	Yes	No T	ype: Self employed	Full-ti	ime Pai	t-time	Casual	Contractor
Employer 1								
Name				C	Occupation			
Name of contact person				т	Felephone			
Salary per month	\$		(please attach a copy of	the mos	st recent pays	lip)		
Employer 2								
Name				C	Occupation			
Name of contact person				т	Telephone			
Salary per month	\$		(please attach a copy of	the mos	st recent pays	lip)		
Employer 3								
Name				C	Occupation			
Name of contact person				т	Felephone			
Salary per month	\$		(please attach a copy of	the mos	st recent pays	lip)		
Financial details								

Income you receive per month apart from salary

Centrelink (please attach a copy of the most recent Centrelink statement)	\$
Other (such as rent, investment). Details of other sources of income	
	\$
	\$
	\$

Expenses you pay per month

Rent and/or mortgage payments	\$ Child support	\$
Other loan payments	\$ Motor vehicle expenses (petrol, insurance, lease payments)	\$
Credit card payments	\$ Living costs (telephone, food, clothing, public transport etc.)	\$
Utilities	\$	

Other costs (such as school fees, hospital/medical costs, insurance etc.) Details of other costs

\$
\$

For more information

More information about the Financial Hardship provisions in the Code of Practice can be found at **codeofpractice.com.au/for-consumers/financial-hardship**

Free, confidential, independent financial advice is also available to you via Financial Counselling Australia www.financialcounsellingaustralia.org.au or through the National Debt Helpline 1800 007 007.

Declaration

I/We declare that the information provided is true and correct.

Date

Privacy consent notice

Our Privacy Policy describes how we collect, disclose, store and use personal information as well as how to access it, correct it or make a complaint. When we say personal information we may also mean sensitive information such as health information, criminal history or professional memberships that's relevant to us issuing, administering or managing products or providing services and the terms on which we will do these things. We use personal information to issue, administer and manage products and provide services. You can view our Privacy Policy at <u>www.qbe.com.au/privacy</u>, or to obtain a copy by phoning us on 133 723 or requesting it from our authorised representatives or service providers.

We may share your information with other QBE Group companies, our authorised representatives and service providers, each of which may be based outside of Australia.

By giving us personal information you consent to us collecting, disclosing, storing and using personal information in accordance with our Privacy Policy. If you give us someone else's personal information you confirm that you've obtained their consent to do so.

If you don't provide all of the personal information we've requested, we may be unable to issue, administer and manage products and provide services.

Submitting your application

Once you've completed your application, you can send it to us by email. To do this:

- 1. Scan your supporting documents and save them to your computer
- (make sure you've blacked out any government identifiers like your tax file number);
- 2. Click the 'Submit' button below (your email application should automatically open on your computer);
- 3. Attach the supporting documents to your email;
- 4. Click send (our email address should already be in the 'To' field).

SUBMIT

If you can't send your application to us as we've described, just print your application and send a scanned copy of it, together with your supporting documentation, to **customercare@qbe.com**.