



**Financial Hardship Application Form  
Version 1: 5 March 2008**

**I Care, I Choose Jackgreen**

Enquiries 9am – 6pm,  
5 days

Ph: 02-83023850

Fax: 02 8356 9755

Level 5, 52 William Street  
East Sydney NSW 2011

**1. How to complete this form**

This form assists Jackgreen in assessing the best payment plan for you and identifying hardship. If you are assessed as being in Hardship, Jackgreen will not take any collections or disconnection action on your account and will review your account on a monthly basis to ensure that your account is being managed properly.

Please provide us with as much financial information as you can so that we can access your situation and attach information to confirm your income and expenditure

We have included a number of categories for income and expenses to prompt you to think about all the sources of income and expenses that you have.

If you feel uncomfortable in completing this form please call to discuss your situation with a Customer Service Officer on 1300 465 225.

Jackgreen's Hardship Policy can be viewed on our website:

[http://www.jackgreen.com.au/product-information/hardship\\_policy.php](http://www.jackgreen.com.au/product-information/hardship_policy.php)

**2. Privacy Statement**

The information provided by you in this form will only be used for the purpose of evaluating a payment plan appropriate to your situation.

Jackgreen will store the information appropriately and not use it for any other purpose without your approval.

**3. Personal Information**

Your name \_\_\_\_\_

Jackgreen account number \_\_\_\_\_

Residential Address \_\_\_\_\_

Phone number \_\_\_\_\_

Work number \_\_\_\_\_

Mobile number \_\_\_\_\_

**4. What is the cause of your financial hardship?**

---

---

---

---

---

---

---

---

---

---

**5. Financial Information**

**Please attach documents to support the information you provide below.**

What is your main source of income? \_\_\_\_\_

How much do you earn per fortnight? \_\_\_\_\_

Are you living with a partner or spouse? \_\_\_\_\_

How much does your partner or spouse earn per fortnight? \_\_\_\_\_

Centrelink Benefits (please specify) \_\_\_\_\_

Centrelink Benefits number \_\_\_\_\_

Government Benefits (please specify) \_\_\_\_\_

What is your current account balance? \_\_\_\_\_

**6. Income**

Please complete any relevant sections of income below.

Type of Income	How much?	How often?	Total per month
Earnings from employment	\$		\$
Allowance/pension	\$		\$
Family Tax Benefit	\$		\$
Child Support received	\$		\$
Any other income (please specify)	\$		\$
<b>TOTAL Income</b>	<b>\$</b>		<b>\$</b>

**7. Expenditure**

How much do you spend on necessities per fortnight?

---

---

**8. Offer to pay debt**

I, \_\_\_\_\_

Hereby understand, that my Jackgreen Energy account balance is \$ \_\_\_\_\_

I offer to pay the sum of \$ \_\_\_\_\_

- In Full
- Weekly
- Fortnightly
- Monthly

**Payment Method**

- Credit card
- Bill payment
- Direct debit \*\*
- Centrepay (Centrelink) \*\*\*
- Other – please specify

\*\* If you have chosen direct debit as a payment method, Jackgreen will send you the appropriate forms.

\*\*\* If you have chosen Centrepay as a payment method please contact Jackgreen on 1300 465 225 to arrange this over the phone.

**9. Authorised Representative:** If you wish to have a Representative provide Jackgreen with information on this form for the purpose of assessing hardship please provide us with their details below.

**Family name** \_\_\_\_\_ **Given names** \_\_\_\_\_

**Telephone (day time)** \_\_\_\_\_

**Relationship to the applicant** \_\_\_\_\_

**Sign** \_\_\_\_\_

**Date** \_\_\_\_\_

I declare that the information that I have given in this form and any attachment to the form is correct.

**Signature of applicant or representative**

**Date**

\_\_\_\_\_

\_\_\_\_\_