

Extreme Financial Hardship Remission



Application for Rate Remission

Applicant Information:

Property Number: _____
(refer Rates Invoice)

Valuation Roll Number: _____
(refer Rates Invoice)

Ratepayer Name(s): _____

Property Location: _____
(refer Rates Invoice)

In addition to a comprehensive outline of the circumstances which have caused or will cause extreme financial hardship, applicants must provide the following information:

Residential Applications:

A detailed account of ratepayer[s] annual income and expenses from all sources, details of all assets and liabilities, and details of any dependants.

I certify that to the best of my knowledge, the above particulars are correct and comply with the conditions and criteria (overleaf).

Name(s) of Ratepayer(s): _____ Phone: _____

Ratepayer(s) Signature(s): _____ Date: _____

Office Use Only:

Application meets defined conditions and criteria (overleaf): Yes No

Adequate evidence produced of extreme financial hardship: Yes No

Notes for Applicants:

Objective of the Policy:

To enable Council to grant remission, for cases of extreme financial hardship, on a case-by-case basis, of all or part of the rates.

Conditions and Criteria:

Council may remit rates in accordance with the policy where the application meets all of the following criteria:

The ratepayer(s) must be the current occupier(s) of the rating unit which must be solely used for their personal residential purposes.

Council must be satisfied that extreme financial hardship exists or would be caused by requiring payment of the whole or part of the rates.

The ratepayer[s] must provide any evidence that Council deems appropriate to support the claim of extreme financial hardship.

The ratepayer[s] must make acceptable arrangements for payment of future rates, for example by setting up a system for regular payments.

Applications received during a rating year will be applicable from the commencement of the following rating year. All applications must be on the prescribed form and will not be backdated.

Application:

Applications for remissions shall be considered by the Council or its delegated officer[s].

Once you have completed this application form, please save it to your computer for your records, then email a copy of the saved document to mdc@marlborough.govt.nz