

## Severe Financial Hardship Questionnaire

When completing this form, please use a **black** pen and BLOCK letters. This request will be invalid if unsigned.

Once completed, please return to: TASPLAN, GPO Box 1547 Hobart TAS 7001

Free call: 1800 005 166 Email: info@tasplan.com.au

Member Number	Centrelink Customer Reference Number		
Mr/Mrs/Ms/Miss Surname			
Given Names			
Date of Birth (DD/MM/YYYY)			
Street Number/PO Box Street Name			
Suburb/Town/City	State Postcode		
Contact Telephone Number	Mobile Number		
Email Address			
List the number of financial dependants	List the age(s) of your dependants		
Please explain briefly the cause(s) of your financial hardship and how the money will be used if released			

## Section 2: Proof of Debt

What amount do you estimate would relieve your current Severe Financial Hardship?		
\$	ensure that you provide sufficie If sufficient evidence is not prov claiming, your claim will be asse provide. If you have not already	ning is greater than \$1,000, please nt evidence of debt and/or hardship. ided for the amount that you are essed on the evidence that you do provided evidence of financial ant proof of debt documentation to
List all current weekly expenses in relation to you, your partner and your dependants		
Expenses (weekly expenses)		Amount (\$)
List any payments due (current and immediate debts, arrears etc.)		
Outstanding Debts	Total Owing (\$)	Payment in Arrears (\$)
Please note that if your Tasplan account balance would be less than \$200 after your f	inancial hardship navmont than your	full account halance will be haid out

## Severe Financial Hardship Statutory Declaration

To the Trustees of Tasplan:				
Surname (Family Name)				
l,				
Given Names				
Street Number/PO Box Street Nam	ne			
of				
Suburb/Town/City		State Postcode		
DO SOLEMNLY AND SINCERELY DECLARE that:				
The information provided in the Application ann	· ·			
• I am unable to meet reasonable and immediate family living expenses and that I do not have any assets (apart from my home) which could (reasonably and realistically speaking) be sold to cover this gap.				
The amount I am requesting to be released is need.	ecessary to meet this reasonable and immedia	ate living expense.		
And I make this solemn declaration by virtue of the Statutory Declaration Act 1959, and subject to the penalties provided by that Act for making of false statements in statutory declaration, conscientiously believing the statements contained in this declaration to be true in every particular.				
Member's Signature				
		Dated (DD/MM/YYYY)		
TAKEN AND DECLARED BEFORE ME AT				
Dated (DD/MM/YYYY)				
Defere me				
Before me		Must be size ad and dated by seconds or		
		Must be signed and dated by member and witnessed on the <b>same date</b> .		
(To be signed before a Justice of the Peace, Magistrate o	or Commissioner for Declarations).			
Severe Financial Hardship Conditions of F	Release			
To be eligible to claim the early release of superannu is issuing your income support payment confirming		om Centrelink or the Department of Veteran's Affairs (whichever		
That you have been in receipt of an approved Co		a continuous period of 26 weeks; and		
		ne approved payment for a total period of 39 weeks after		
reaching age 55.				
Centrelink Benefits (Allowances) 13 28 Centrelink Pension 13 23				
Centrelink Pension 13 23  Department of Veteran's Affairs 13 32				
Note that one payment per calendar year can be m There is no maximum if you are over this age.		nere you are under 55 years and 39 weeks).		
Severe Financial Hardship Checklist				
Make sure you have done each of the following befo	ore returning your application to Tasplan for pr	rocessing.		
Obtained a letter from Centrelink or Department of Veteran's Affairs				
Completed the How to Claim Your Tasplan Hardship Benefit Form				
Completed the Severe Financial Hardship Questionnaire				
Attached a copy of correctly certified identification				
Attached sufficient proof of debt (if your balance is greater than \$1,000)				
Attach any associated documentation before returning this form to Tasplan				

If you have any questions about completing this form, please call our Customer Services Team on 1800 005 166