#### Local Government Superannuation Scheme

#### **Application for Financial Hardship Benefit**

To the Trustees, Local Government Superannuation Scheme

I, \_\_\_\_\_, Member Number\_\_\_\_\_, of the Local Government Superannuation Scheme, hereby apply for a significant hardship benefit from the Scheme on the following terms:

1. The reason for needing a benefit is \_\_\_\_\_

**2.** I have considered refinancing and adding to existing borrowings to resolve the hardship situation, but have not been able to access any such source of finance.

3. The amount of the benefit that I require is \$\_\_\_\_\_

4. A statement of my personal financial position (my current assets and liabilities) is attached.

**5.** A statement of my personal income details (my income and outgoings) that is anticipated over the next year is attached.

**6.** A deposit slip for the New Zealand bank account into which the benefit is to be paid is attached *or* 

I have elected to have the benefit paid into my bank account

I certify that all the information in this application form and the attachments are true and correct.

Date	
Date	
nature:	nature:

### Local Government Superannuation Scheme

<b>PERSONAL FINANCIAL POSITION</b> Please ensure that <u>all</u> jointly owned Liabilities, Assets and Partner Incomes are included in these financial statements.				
Liabilities	Assets			
Money owed on Mortgages Name of organisation/bank Interest Rate Amount Owing	Real Estate properties owned Address of principal properties only			
·····% \$%				
Monthly Payments \$	Regd/Govt Valuation Valuation Date Est. Market Value			
Overdrafts/bank Personal Loans Name of Bank Credit Limit Interest Rate Amount Owing	\$\$ \$\$.			
% \$ % \$ % \$ % \$	Deposits and Cash Investments Deposited with Current Balance			
Monthly Payments \$	\$			
Credit & Store Cards Held Card Type/Issuer Credit Limit Interest Rate Amount Owing	\$ \$			
%\$%\$ %\$%\$%	Life Insurance/Superannuation Name of Company Current Value S			
Monthly Payments \$	\$			
Owed to Hire Purchase Companies Company Interest Rate Amount Owing	\$			
·····% \$% \$%	Vehicles Type, make and year Est Market Value			
Monthly Payments \$	····· \$			
Other	\$			
Give details of any other money owed Interest Rate	Other Assets Est Market Value			
% \$	\$\$\$			
·····% \$	\$\$ \$			
Monthly Payments \$	\$			
Total Liabilities \$	Total Assets \$			

### Local Government Superannuation Scheme

PERSONAL INCOME AND OUTGOINGS DETAILS - (Please complete both pages) Please ensure that all partner incomes and expenditures are included in all sections			
Sources of Income	Yearly, before tax	Monthly, after tax	
Salary/Wages	\$	\$	
Partner's Salary/Wages	\$	\$	
Commission Income	\$	\$	
Partner's Commission Income	\$	\$	
Rental Income	\$	\$	
Partner's Rental Income	\$	\$	
Business Income	\$	\$	
Partner's Business Income	\$	\$	
Other (Interest, Dividends, etc)	\$	\$	
Total Income	\$	\$	
Fixed Monthly Outgoings (those that will continue if this grant is approved)		Monthly amounts	
Loan Repayments		\$	
Rates and House Insurance		\$	
Rent or Board Payments		\$	
Hire Purchase Payments		\$	
Personal Insurances (Life, Medical)		\$	
Credit/Store Card Payments		\$	
Childcare/Support/Maintenance for persons not living with you		\$	
Total Fixed Monthly Outgoings		\$	
Monthly Surplus Available for Living Costs		\$	

### Local Government Superannuation Scheme

PERSONAL INCOME AND OUTGOINGS DETAILS - (Please complete both pages) Please ensure that all partner incomes and expenditures are included in all sections		
Monthly surplus Available for Living Costs (from previous page)	\$	
Monthly Living Costs		
Food	\$	
Clothing	\$	
Transport (Public & Private)	\$	
Utilities (Power, Gas, Phone(s))	\$	
Medical costs	\$	
Education	\$	
Entertainment	\$	
Holidays	\$	
Other costs	\$	
Total Monthly Living Costs	\$	
Monthly Surplus/(Deficit)	\$	