

Unforeseen Hardship Application Form

All sections need to be completed



If you're experiencing unforeseen hardship, it's important that you complete this application form as soon as possible and provide as much detail as you can. If you have any questions, you can call us on 0800 231 233, email customersupport@tsb.co.nz or stop by your local branch - we're happy to help.

Your details

First name(s)				First name(s)			
Surname				Surname			
Phone				Phone			
Email				Email			
Occupation				Occupation			
Employment	Full time	Part time	Not employed	Employment	Full time	Part time	Not employed
Loan number (if known)	1	5	3	9			

Reason for applying

PLEASE TICK ONE Illness Injury Loss of employment End of a relationship Other (please specify)

Please explain what led to your recent unforeseen hardship, how this is impacting your current financial situation, and how TSB can help. We'll use this information when assessing your application.

MORE SPACE IS AVAILABLE ON THE FINAL PAGE IF REQUIRED.

Requested help

Have you made an unforeseen hardship request from TSB in the past 12 months: Yes No

How can TSB help?

Extend the term of your loan, which will reduce the amount of your regular payments.

Postpone payments for a specified period.

Both of the above (extend the term of the loan and postpone payments for a specified period).

Please provide details of how long you require assistance for and how this assistance will help you:

MORE SPACE IS AVAILABLE ON THE FINAL PAGE IF REQUIRED.

Income information

Do you qualify for any of the following:

ACC payments	Yes	No
Redundancy payment	Yes	No
Insurance payments either loan, income or medical	Yes	No
WINZ financial assistance	Yes	No

If yes, please supply documentation and information to support this.

Has your income changed? Yes No

If yes, please provide evidence of this i.e., letter of redundancy or letter from your employer, medical certificate, ACC letter, etc.

Next steps

Once all the information needed for your application has been supplied and you've signed this unforeseen hardship application form, we'll assess the information provided. If we need any further information, we'll get in touch. Applications are processed within 20 working days, provided all the information has been supplied.

If at any time you have further questions, or if you remember details that may be relevant, please contact our Customer Care and Support team on 0800 231 233 or email customersupport@tsb.co.nz.

Declaration

I/We declare that each of us:

- Has read this document and fully answered all questions to the best of our ability.
- Confirm no relevant information has been withheld.
- Isn't an undischarged bankrupt, or currently subject to any proceedings under the Insolvency Act 2006.
- Consent to TSB retaining the details supplied, and making relevant enquiries about me to enable an application to be processed.

Borrowers

Full name _____

Signature

Date

Full name _____

Signature

Date

Checklist



Please provide all relevant documents:

Evidence your income has changed i.e letter of redundancy or letter from your employer, medical certificate, ACC letter.

The last 90 days of statements for all credit/store accounts.

The last 90 days of statements for all other bank accounts and loans not held at TSB.

WINZ financial assistance letter.

Completed Statement of Financial Position.

Additional information

Statement of Financial Position



Name(s)

No. of individuals dependent on this financial position Adults Children Children's ages

If household income and expenditure is not pooled for household financial obligations, please complete a separate Statement of Financial Position for each borrower.

Assets and Liabilities

Assets

House/Property		Value	Savings/Investments		Value
Address		\$	Held with		\$
Address		\$	Held with		\$
Address		\$	KiwiSaver		\$
Motor vehicles			Superannuation		\$
Number of vehicles		\$	Shares/Bonds		\$
			Other		\$
			Other		\$
Total Assets					\$

Please list all banks where transactional accounts are held:

Held with	Main Bank	Held with	Main Bank
Held with	Main Bank	Held with	Main Bank

Liabilities

This includes the full amount of any loan(s) that you are legally liable for either jointly or individually, such as any loan(s) you are a guarantor for, any loan(s) from family or friends, etc.

Home loan(s)			Owing:	Limit:	Other lending			Owing:	Limit:
Held with			\$	\$	Hire purchase		\$	\$	
Held with			\$	\$	Buy Now Pay Later		\$	\$	
Held with			\$	\$	Overdrafts		\$	\$	
Personal loan(s)			Owing:	Limit:	Credit card(s)			Owing:	Limit:
Held with			\$	\$	Held with		\$	\$	
Held with			\$	\$	Held with		\$	\$	
Student loan			\$	\$	Held with		\$	\$	
Other			\$	\$	Held with		\$	\$	
Total Liabilities							\$	\$	

Income & Expenditure

Income

You must provide details of every source of income (including any business income) earned that exceeds \$7,500 per annum.

Primary applicant income						Value	Frequency	Joint applicant income						Value	Frequency
Annual gross salary						\$		Annual gross salary						\$	
Net income						\$		Net income						\$	
Self employed net income						\$		Self employed net income						\$	
KiwiSaver contribution								KiwiSaver contribution							
3%	4%	6%	8%	10%	n/a			3%	4%	6%	8%	10%	n/a		

Statement of Financial Position



Other income	Value	Frequency
ACC	\$	
Allowances	\$	
Benefits	\$	
Board income	\$	
Bonuses	\$	
Business income	\$	
Child support	\$	

Other income	Value	Frequency
Commission	\$	
Off shore income	\$	
Rental income	\$	
Superannuation	\$	
Working for families	\$	
Other	\$	
Other	\$	

Expenditure

Loan and card payments	Value	Frequency
Total home loan payments	\$	
Personal loan payments	\$	
Student loan payments	\$	
Hire purchase payments	\$	
Buy Now Pay Later payments	\$	
Other loan payments	\$	

Insurance	Value	Frequency
House	\$	
Contents	\$	
Vehicles	\$	
Health/Life	\$	

Other payments	Value	Frequency
Rent/Board	\$	
Child support	\$	
Rates/Water rates	\$	

Other payments	Value	Frequency
Body corporate fees	\$	
Childcare & daycare	\$	
Leasehold fees	\$	
School fees	\$	
Food (Groceries)	\$	
Food (Dining out/takeaways)	\$	
Utilities (e.g. electricity, water, gas)	\$	
Transport (e.g. petrol, private/public transport, vehicle maintenance)	\$	
Personal expenses (e.g. clothing & footwear, personal care for yourself & dependents)	\$	
Medical expenses	\$	
Telecommunication (e.g. internet and phone)	\$	
Discretionary living expenses (e.g. alcohol/tobacco products, pet care, hobbies, other)	\$	

Supporting information

Are you aware of any changes that could significantly impact your household income, expenses, or liabilities in the next 24 months? Yes No

If you answered yes, please provide details:

If all household income and expenditure is not pooled for household financial obligations, please specify the % split. %