

APPLICATION FOR RATES REMISSION ON GROUNDS OF EXTREME FINANCIAL HARDSHIP



This form must be completed by the registered owner/occupier of the property and must relate to a property in the Central Otago District. This form is for residential ratepayers only. This application is not for commercial ratepayers.

This application is valid for 12 months, although a consecutive application may be considered to a maximum of 2 years in totality.

If the sale or transfer of the property is within five years of receiving the remission the ratepayer receiving the remission agrees to re-pay the remission in full as part of the property settlement.

Ratepayer Name(s):

PROPERTY INFORMATION

Note: Water, wastewater and refuse charges will be excluded and not subject to remission under the Remission of Rates for Extreme Financial Hardship policy.

Valuation No(s):	Property Location(s):	Instal No:	Year
28_____ - _____			of 20__ /20__
28_____ - _____			of 20__ /20__
28_____ - _____			of 20__ /20__
28_____ - _____			of 20__ /20__

	Yes	No
Are there other owners / occupiers / family trusts or other trusts? If yes, then please state who: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you live at the property? If no, does anyone live at the property?	<input type="checkbox"/>	<input type="checkbox"/>
Is this an investment property? How much do you receive in rent a week?	<input type="checkbox"/>	<input type="checkbox"/>
Is this property for sale on the real estate market?	<input type="checkbox"/>	<input type="checkbox"/>
Do you qualify for a Department of Internal Affairs rates rebate?	<input type="checkbox"/>	<input type="checkbox"/>
Have you received any other welfare assistance (food grants, benefits etc)?	<input type="checkbox"/>	<input type="checkbox"/>

STATUTORY DECLARATION

This statutory declaration is a legal document and should be treated as such. Ensure information is true and correct to the best of your knowledge and belief. You may be prosecuted if you knowingly make a false oath or affirmation.

I (Enter your full name)

of (Enter the address where you live)

(Enter your occupation – for example, bricklayer, teacher, unemployed)

solemnly and sincerely declare that

(List the facts in your own words. Number each point to make it clearer)

I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957. I agree that if this property is sold within five years of receiving this remission, the remission will be paid in full prior to the settlement of the property sale.

Note: Do not complete the following section until you are with the person witnessing your declaration.

Your signature

.....

Declared at *(Place, for example town or city)*

(Day/month/year)

Before me *(Name of official witness)*

.....

Signature

.....

For example, a Justice of the Peace, solicitor or another person authorised to take a statutory declaration)

Your Checklist

Evidence of hardship	
• Income or income loss	<input type="checkbox"/>
• Evidence of costs/debt/commitments	<input type="checkbox"/>
Evidence of bank account	<input type="checkbox"/>
DIA eligible	<input type="checkbox"/>
Letter from your primary bank or lending institution confirming they will not increase your mortgage to meet your costs	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Other Supporting documentation	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
Statutory Declaration	<input type="checkbox"/>

Office Use

Government Valuation	
Current Rates	
Arrears Owing	
Title Search Details	

Recommendations by Executive Manager - Corporate Services	
Action	
Signature	
Date	

Approved by Chief Executive Officer	
Action	
Signature	
Date	