

If you're a property owner and experiencing significant financial hardship, each year you can apply to defer your rates under the [Rates Act 2004](#). For further information on Rates assistance visit the ACT Revenue Office website on <https://www.revenue.act.gov.au>

Please forward completed application forms to the ACT Revenue Office at PPD@act.gov.au or post to PO Box 293, Civic Square ACT 2608.

OWNER DETAILS

Full Name		Date of Birth:	
Postal Address			
Email			
Contact Phone Number:		Mobile:	

ADDITIONAL OWNER DETAILS

Full Name		Date of Birth:	
Postal Address			
Email			
Contact Phone Number:		Mobile:	

PROPERTY DETAILS

Account number:	
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Unit number	Street number	Street name	Suburb	Postcode

Is the property your principal place of residence:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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DEFERMENT DETAILS

Please indicate which charges you would like deferred:	Rates arrears	<input type="checkbox"/>
	Current Year's Rates	<input type="checkbox"/>
	Interest	<input type="checkbox"/>

If your circumstances change, you can stop the deferral of rates at any time by requesting in writing that the deferral of rates stop.

FINANCIAL INFORMATION

What is the estimated current market value of the property?	\$
Are there any mortgages over the property?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide details below.

Lending Institution	Outstanding amount	Monthly repayments	Arrears
	\$	\$	\$
	\$	\$	\$

Financial documentation to confirm the above Financial Information is attached:

OTHER LIABILITIES - Provide details of any other Personal Loans, Credit Card liabilities etc.

Financial/Lending Institution	Credit Amount	Balance Owing	Fortnightly repayments	Arrears
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$

EXPENDITURE – Please provide details of your fortnightly expenditure

Food	\$	Education	\$
Clothing	\$	Insurance	\$
Water and Sewerage	\$	Loans/Hire purchase	\$
Gas and Electricity	\$	Credit/store cards	\$
Medical expenses	\$	Telephone	\$
Motor vehicle expenses	\$	Other	\$

Documentation to support the above Expenditure information is attached:

INCOME - Provide details of your fortnightly income from all sources – e.g. salary, pensions, allowances, investment, rental income or board, maintenance payments, share dividends and bank interest

Are any applicants currently employed or in receipt of a pension or allowance?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide details below
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Employer/Pension/Allowance	Pension number (if applicable)	Fortnightly amount
		\$
		\$
		\$

Provide details of other fortnightly income– e.g. rental income or board, maintenance payments, share dividends and interest

Income source	Fortnightly amount
	\$
	\$
	\$

Documentation to support the above income information is attached:

ASSETS – Please provide details of all other assets Including motor vehicles, boats, caravans

Asset	Description	Value

Documentation to support the above Assets information is attached:

BANK ACCOUNTS, SAVINGS AND INVESTMENTS – Please provide details of your bank accounts, term deposits and investment accounts

Financial Institution	Branch	Account number	Balance
			\$
			\$
			\$
			\$

Documentation to support the above Savings and Investments information is attached:

COMPENSATION AND THIRD PARTY CLAIMS – Please provide details of your fortnightly expenditure

Do you have an outstanding compensation/third party claim? (If yes, provide details including the company the claim is with and claim number) Yes No

Insurance company:		Claim number:	
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Documentation to support the above Compensation or Third Party Claims information is attached:

DEPENDENTS – Please provide details of dependents names and ages

Name	Age	Name	Age

Documentation to support the Dependents information is attached:

SUPPORTING STATEMENT

DECLARATION

I/We

(Full name of all owner applicants)

Declare that:

- I/we wish to make an application under Section 46 of the *Rates Act 2004* for a deferment of rates;
- To the best of my/our knowledge the information provided in this application is true and correct;
- I/we authorise the ACT Revenue Office to verify the details that I/we have provided to substantiate my/our application to defer my/our rates liability;
- I/we understand that this information will be used by the ACT Revenue Office to confirm the information provided in this application and to confirm my/our eligibility for a deferment of rates and that the information provided will not be used for any other purpose.

Signature of owner 1:

Date:

Signature of owner 2:

Date

- **All applicants/owners must sign the application.**
- **Giving false or misleading information is a serious offence (Section 338 *Criminal Code 2002*).**

PRIVACY NOTICE

The Commissioner and staff at the ACT Revenue Office are dedicated to protecting your personal information and informing you of how we collect, hold, use and disclose it. The information we collect helps us determine whether you have a tax liability, or an entitlement for a grant, exemption or concession; or to ensure the efficient lodgement and refunding of rental bonds. It may be disclosed to third parties with your consent, or as permitted by law. Our privacy policy is available on our website. It explains how we manage information, how you can access and correct your personal information and our process for handling complaints.