



**Please return this completed form to:**  
 Email: [mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au)  
 22 Nolan Street, Maryborough VIC 3465  
 PO Box 194, Maryborough VIC 3465  
 Tel: 03 5461 0610

# Application for COVID-19 Financial Hardship Assistance form

<b>Address of Property:</b>		
<b>Property Number:</b>		
<b>Name:</b>		
<b>Postal Address:</b>		
		<b>Postcode:</b>
<b>Telephone Number:</b>		<b>Mobile:</b>
<b>Email Address:</b>		
<b>Amount owing to Council</b>	\$ _____	
<b>Application for COVID-19 Financial Hardship</b>		
<b>Section A</b>  <b>For businesses</b>	Has your business has been assessed by the Australian Taxation Office (ATO) as being eligible for the Commonwealth JobKeeper Payment? Yes <input type="checkbox"/> Go to Section D      No <input type="checkbox"/> Go to Section C	
<b>Section B</b>  <b>For individuals</b>	Have you or a member of your household lost their job as a direct result of the COVID-19 Pandemic? Yes <input type="checkbox"/> What is the name of the business that the job was lost from? ..... Go to Section D No <input type="checkbox"/> Go to Section C	
<b>Section C</b>  <b>If answered No to Section A or B above</b>	Please describe why the COVID-19 Pandemic has caused you financial hardship....  Please provide appropriate evidence to support your claim	

<b>Section D - I certify that the information provided in this application is true and correct.</b>	
<b>Signature of Applicant:</b>	
<b>Date:</b>	
<b>Privacy Collection Statement:</b>	
<i>The collection and handling of personal information will be conducted in accordance with Council's Privacy Policy which is displayed on Council's website and is available for inspection at Council's customer service centre. Please refer to the Privacy Policy for further information.</i>	
<i>Applications will be assessed in accordance with Council's COVID-19 Financial Hardship Policy.</i>	