## **Financial Hardship Application Form**



If you have any questions about the process, or if you require assistance to complete this application, please contact our Help team on 1800 240 125 (Office hours Monday to Friday, 8:15 am to 5:15 pm execpt public holidays), or at corporate@sovereigninsurance.com.au

| corporate@sovereigninsurance.com.au  |  |                      |   |
|--|--|----------------------|---|
| Policy Number:   |  |                      |   |
| Please complete all sections.  |  |                      |   |
| Applicant (if there are more than two applicants, please complete an additional application)                     |  |                      |   |
| Applicant 1 Surname  | Applicant 1 Given name(s)                |                      |   |
|  |  |                      |   |
| Applicant 2 Surname  | Applicant 2 Given name(s)                |                      |   |
|  |  |                      |   |
| Postal address   |  | State                | Postcode                                |
| . oota, daaress  |  | Clate                |   |
| Preferred contact number   | Email Address                            |                      |   |
| Preferred contact number   | Email Address                            |                      |   |
|  | We will use this email address for all w | ritten communication | n unless you advise us                  |
|  | that you want to receive contact by po   |                      | , |
| Hardship Details   |  |                      |   |
| Circumstances of Hardship  |  |                      |   |
| Please explain the reasons for your application  |  |                      |   |
|  |  |                      |   |
|  |  |                      |   |
|  |  |                      |   |
|  |  |                      |   |
| Nature of Assistance   |  |                      |   |
| What assistance would you like Sovereign Insurance Australia to consider?  |  |                      |   |
| Extension of due date for payment. If so, when will you be able to make payment?                                 |  |                      |   |
| Paying in instalments. What can you afford, how often and over which period?                                     |  |                      |   |
| Paying a reduced lump sum. What can you afford?  |  |                      |   |
| <ul> <li>Postponing one or more instalments. When will you be able to start/re-start making payments?</li> </ul> |  |                      |   |
| Other (including combination of the above options or a possible waiver of the debt).                             |  |                      |   |
| Please provide details of what you are seeking:  |  |                      |   |
|  |  |                      |   |
|  |  |                      |   |