

REQUEST FOR FINANCIAL ASSISTANCE

Business Applicants Only

What does financial difficulty mean?

Financial difficulty means you are unable to repay what you owe and are experiencing difficulty meeting your repayment obligations. This can be as a result of an unexpected event or unforeseen changes outside your control

In line with the Banking Code of Practice, we have a policy in place to help customers (including joint account holders and guarantors) experiencing genuine difficulty meeting repayments or hardship.

When should you use the application?

What should you do if you are suffering hardship or having financial difficulties? Under the Banking Code of Practice, individual or small business customers who are unable to meet their credit repayment obligations, as a result of financial difficulties, can apply to BOQ for assistance. Customers or their representative should contact BOQ as soon as possible to discuss options available. Guarantors who have received a demand for payment and are experiencing financial difficulty should also contact BOQ as soon as possible to discuss options available.

Where a sudden or unexpected change has occurred through fluctuations in small business income, illness, or another reasonable cause and who still expect to be able to meet their credit obligations with assistance from the credit provider, can apply for assistance.

Examples of the types of assistance that we may provide include flexibility in meeting your scheduled repayments, an extension of your loan term or meeting a payment obligation.

What will we do?

- We will review each application on its merits.
- We may offer assistance to those customers or guarantors who are assessed to be suffering genuine financial difficulties or hardship but who will still be able to meet their repayment obligations if assistance is provided.
- We may contact you if further supporting documentation/information is required, to better understand your situation. Otherwise a response to your application will be provided in writing to you.
- We will provide the guarantor with written notice if the borrower has advised us that they are experiencing financial difficulty which has resulted in a change to their loan.
- For more information about our processes for working with customers in Financial Difficulty please refer to our website: <https://www.boq.com.au/important-information/Financial-hardship> or contact the Customer Assistance Team on 1800 079 866, Monday – Friday 8.30am – 5pm AEST.

How do you apply?

- Complete this application form and attach copies of all supporting information (as detailed below).
- You can submit this application form and supporting information in a number of ways:
- Visit any branch; or
- Telephone your account manager; or
- Visit the BOQ website – www.boq.com.au; or
- Scan and Email: customerassistanceteam@boq.com.au or
- Post to: Customer Assistance Team
GPO Box 898
Brisbane, QLD 4001
- If you need any assistance in completing this application, please refer to your nearest branch or call our Customer Assistance Team.

What supporting information is required?

Attach any items listed below that will support your application.

- ☐ Last 2 years Tax Returns or Profit and Loss Statements and a current balance sheet
- ☐ Medical certificate or any relevant medical documents (if applicable) Rental Income – current signed lease agreement or agent's statement
- ☐ Centrelink documentation (if applicable)
- ☐ Evidence to support closure of business (if applicable)
- ☐ Any relevant legal documentation
- ☐ Any other documents that may support your application

Business Housing, Investment or Equity

Business Details (Non-Personal Applicants)

Business Name

ABN

ACN/ARBN

Business Start Date dd / mm / yyyy

Nature of Business

Trust Details (if applicable)

Current Trading Address

Postcode

State

Postal Address (if different from above)

Postcode

State

Previous Trading Address (if less than 2 years at current address)

Postcode

State

Business Contact Information – Tick preferred contact method

Business phone no

Business fax no

After hours no

Mobile phone no

Business email

Personal email

Business Ownership – Proprietors, Shareholders, Beneficiaries

Full name

Position

Ownership %

Full name

Position

Ownership %

Accountants Information

Accountant name

Contact phone no:

Address

Postcode

State

Balance sheet date dd / mm / yyyy

Annual income date dd / mm / yyyy

Two years financials provided dd / mm / yyyy

Applicant 1 Details

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other _____

Full Name _____ Date of Birth dd / mm / yyyy

Current Address _____

Postcode _____ State _____

Postal Address (if different from above) _____

Postcode _____ State _____

Residential Status: (please tick relevant option) ☐ Rents ☐ Owns ☐ Buying ☐ Other _____

Number of dependants _____

Age of dependants _____

Applicant 1 Contact Details - tick preferred contact

☐ Home phone no ☐ Work phone no ☐ Mobile phone no

☐ Email address _____

Applicant 1 Employment Details

Occupation _____

Employer name _____

Duration of employment _____

Employment status: (e.g. full time) _____

Previous employer name and finish date (if less than 2 years at current employer) _____

dd / mm / yyyy

Applicant 2 Details

☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other _____

Full Name _____ Date of Birth dd / mm / yyyy

Current Address _____

Postcode _____ State _____

Postal Address (if different from above) _____

Postcode _____ State _____

Residential Status: (please tick relevant option) ☐ Rents ☐ Owns ☐ Buying ☐ Other _____

Number of dependants _____

Age of dependants _____

Applicant 2 Contact Details - tick preferred contact

☐ Home phone no ☐ Work phone no ☐ Mobile phone no

☐ Email address _____

Applicant 2 Employment Details

Occupation

Employer name

Duration of employment

Employment status: (e.g. full time)

Previous employer name and finish date (if less than 2 years at current employer)

dd / mm / yyyy

Business Financial Position

Annual Income			
Sales Income	\$	Addbacks	\$
Gross Profit	\$	Income confirmed	\$
Net Income before Tax	\$	Method of verification	\$
Assets		Liabilities	
Cash	\$	Long term liabilities	\$
Investments (shares etc)	\$	Current liabilities	\$
Inventory on hand	\$	Related loans	\$
Accounts receivable	\$	Other liabilities	\$
Fixed assets	\$		\$
Other assets (intangible//patents etc)	\$		\$
Total Assets	A	Total Liabilities	B
NET POSITION	A MINUS B		

Applicant/s Financial Position

Assets – The Things You Own		Liabilities – The Money You Owe			
Property assets		Mortgages			
Address/s	Value	Organisation	Amount Owng	Credit Limit	Minimum Monthly Payment
	\$		\$	\$	\$
Jointly with:		Jointly with:			
	\$		\$	\$	\$
Jointly with:		Jointly with:			
	\$		\$	\$	\$
Jointly with:		Jointly with:			
	\$		\$	\$	\$
Jointly with:		Jointly with:			
	\$		\$	\$	\$
Total value of property assets	\$	Total Value of mortgages	\$		

Motor vehicles		Other loans			
Make & Model	Value	Organisation	Amount Owning	Credit Limit	Minimum Monthly Payment
	\$		\$	\$	\$
	\$		\$	\$	\$
	\$		\$	\$	\$
Total value of property assets	\$	Total Value of mortgages		\$	
Investments		Other debts (including debts you have guaranteed)			
Superannuation	\$	Description (outstanding rates/insurance etc)			Amount owing
Shares	\$				\$
Total value of investments/shares	\$	Jointly with:			
Other assets					\$
Contents	\$	Jointly with:			
Boat/Caravan	\$				\$
Time Share	\$	Jointly with:			
	\$	Total value of other debts			\$
	\$	Credit/store cards			
Total value of other assets	\$	Organisation	Amount Owning	Credit Limit	Minimum Monthly Payment
Bank accounts			\$	\$	\$
Organisation	Value		\$	\$	\$
	\$		\$	\$	\$
	\$		\$	\$	\$
	\$		\$	\$	\$
Total value of bank accounts	\$	Total value of credit/store cards		\$	
Total value of assets A	\$	Total value of liabilities B		\$	
NET POSITION A MINUS B	\$				

Reason for application

Please provide us with as much information below as possible. The more information you provide the better we can understand your situation and assess whether we are able to provide you with financial assistance. If there is insufficient space, please attach additional pages to this form.

Please describe why you are unable to meet your financial obligation? (e.g. illness, loss of employment)

How can we assist? (reduced/deferred payments)

When do you feel you will be able to resume repayments?

Applicant(s) monthly financial budget**Monthly Income - Individually**

Primary income (payslips required)

Name	Before tax	After tax
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Self employed (activity statements required)

Name	Before tax	After tax
Profit (attach evidence)	\$	\$

Other income (dividends, centerlink etc)

Name	After tax
	\$
	\$
	\$
	\$

Rental income

Address	Net rental
	\$
	\$
	\$

Total Assets**A**

\$

Monthly Expenses - Combined

Food, clothing and entertainment	\$
Utilities (i.e. power, phone, gas)	\$
Insurance (i.e. home, car, life)	\$
Education	\$
Vehicle running costs	\$
Total loan/mortgage monthly commitments	\$
Total credit/Store card monthly commitments	\$
Other: (Please define)	\$

Total monthly commitments**B**

\$

Total net monthly income**A**

\$

Less total monthly commitments**B**

\$

TOTALSURPLUS FUNDS**A MINUS B**

\$

Request for financial assistance

I/We request assistance on the following accounts:

Account/Product type	Account Number

Citigroup Pty Limited ABN 88 004 325 080 ACL No 238098 ('Citigroup') is the credit provider and issuer of BOQ Credit Cards. Bank of Queensland Limited ABN 32 009 656 740 AFSL and ACL No 244616 ('BOQ') distributes BOQ Credit Cards under an agreement with Citigroup. Citigroup and BOQ are independent of each other. BOQ does not guarantee or otherwise support Citigroup's obligations under the credit card contract. Citigroup, and not BOQ, will consider any application for credit card assistance.

Offer to repay

Account Number	Amount Offered	Payment Frequency (weekly, fortnightly, monthly)
	\$	
	\$	
	\$	
	\$	
	\$	

Arrangements with other credit providers

Please provide details of each credit provider, the associated loan/s and details of any assistance that is currently in place.

Has someone provided a guarantee for your loan/s?

If someone is providing a guarantee for these facilities, please provide their name and have them sign the acknowledgement at the end of this application form. Please note that this is not applicable for Credit Card products.

Title	Full Name
Title	Full Name

Reminder: Please have the guarantor sign on the last page of this application

Privacy notification and consent

This Privacy Notification and Consent explains how:

- Bank of Queensland Limited ABN 32 009 656 740 ACL 244 616 ('BOQ') is the credit provider for your personal lending facilities and deposit products; and
- Where your application also includes an application for credit card assistance on credit cards provided to you as a BOQ customer – the credit provider for these credit cards, Citigroup Pty Ltd ABN 88 004 325 080 ACL 238098 ("Citigroup"),
- Collect use and disclose your personal information (including credit information). References to 'you' or 'your' relate to all applicants included in this application form.

If you also apply for credit card financial assistance, then in respect of that application:

- A reference to "we", "our" or "us" in this Notification & Consent will include a reference to Citigroup;
- And any information relevant to guarantors included in this application form will not apply with respect to the credit card financial assistance application.

If at any time you supply us with personal information about another person, you should ensure that you are authorised to do so and you agree to inform that person of our identity and the content of this Notification & Consent.

Collection and use of your personal information

We are required to consider your application for financial assistance under the National Consumer Credit Protection Act 2009. In order to accurately assess your application, we require you to provide specific information, including personal information. We will collect and use this personal information to consider your application for financial assistance in accordance with the Privacy Act 1988 ('Privacy Act').

Where your application relates to a credit card, Citigroup's Privacy Policy will also apply.

You understand that it may also be necessary to disclose certain information about you to, but not limited to, the following entities:

- Regulatory and government bodies,
- Your or our agents,
- Credit and debt agencies,
- Contractors and professional advisors who assist us, and
- Mortgage insurers.

Authority for BOQ to verify information

You hereby provide BOQ with authority to:

- Contact your current or past employers, your accountants and/or solicitors or any other relevant third party to verify the details contained in this application for financial assistance;
- Obtain individual or commercial credit information about you to assess your application for financial assistance or to review any existing credit provided by BOQ to you;
- Give to and get from other credit providers (including any other credit provider who has loaned money to you), a credit report about you and information about your credit arrangements, credit worthiness, credit standing, credit history or credit capacity; and
- Disclose to a guarantor or potential guarantors any financial particulars relating to your accounts with BOQ and any financial information within the knowledge of BOQ in relation to your affairs.

Authority to exchange information

You authorise BOQ to exchange information concerning your financial affairs with any person acting on your behalf, including your financial counsellor or representative rather than dealing with you. BOQ will only give the information to a person authorised in writing by you to seek access to that information.

You, the applicant/s, authorise the person nominated below to obtain this information:

Primary Name		Date of Birth dd / mm / yyyy	
Alternate contact name		Business phone	
Organisation name		Fax	
Postal Address (if different from above)			
		Postcode	State

You, the applicant/s, acknowledge that if we are unable to get in contact with the nominated person, then we will contact you.

Applicant/s Acknowledgement

An applicant can individually apply for financial assistance. Only one applicant's signature is required within the Applicant signature blocks below if this application is being made by a single account holder.

I/We, the applicant/s, warrant that all the facts and information provided in this application are true and correct and I/we hereby acknowledge that, BOQ and Citigroup (as relevant) in accepting this application have relied upon the truth and correctness of such facts.

Applicant 1 signature

X

Date

dd / mm / yyyy

Applicant 2 signature

X

Date

dd / mm / yyyy

A guarantor can individually apply for financial assistance. Only one guarantor's signature is required within the Guarantor signature blocks below if this application is being made by a single guarantor.

Guarantor's Sign-off: I/We agree to BOQ considering the applicant/s Application for financial assistance. Should the application be approved, I am/we are aware that documents will be provided by BOQ outlining any changes to the applicant/s loan/s and I/we may be required to sign documents agreeing to those amendments.

Guarantor 1 signature

X

Date

dd / mm / yyyy

Guarantor 2 signature

X

Date

dd / mm / yyyy