



APPLICATION FORM ➔

Financial Hardship

Call ATC for assistance on 03 9258 1777

1. Questions

If you have questions about the Application process or how to complete this Application form, please contact our office on (03) 9258 1777 between 8.30am to 5.00pm AEST from Monday to Friday, except for public holidays.

2. Submission

Please submit your Application and supporting documentation by email to info@atcis.com.au or alternatively via post to:

ATC Insurance Solutions Pty Ltd
Level 4, 451 Little Bourke Street
Melbourne Vic 3000

3. Next Steps

Upon submission of your Application, we will:

1. Acknowledge receipt;
2. Review and contact you if we require additional information; and
3. Contact you with our decision.

4. Support Services

For free, independent and confidential financial advice, please contact the National Debt Helpline on 1800 007 007 or visit their website at <https://ndh.org.au/>.

5. Standards

ATC Insurance Solutions is committed to complying with the General Insurance Code of Practice, which is found at <http://codeofpractice.com.au/>.

Please complete all sections ➔

Reference Number _____ [Policy Number / Claim Number / Invoice Number / Other]

Applicant/s

Applicant 1

Surname _____

Given Name/s _____

Postal Address _____

Phone Number _____

Email Address _____

Applicant 2

Surname _____

Given Name/s _____

Postal Address _____

Phone Number _____

Email Address _____

Nominated Representative

If you want to nominate a representative to handle your application

Surname _____

Given Name/s _____

Postal Address _____

Phone Number _____

Email Address _____

Preferred Communication Method

All written communication to you or your Nominated Representative will be via email unless you advise otherwise

Preferred Communication Method Email Phone Post

Dependents

Surname _____ Surname _____

Given Name/s _____ Given Name/s _____

Age _____ Age _____

Surname _____ Surname _____

Given Name/s _____ Given Name/s _____

Age _____ Age _____

Financial Hardship Details

Reason

Please outline reason for your application

Assistance

Please outline the assistance you would like ATC Insurance Solutions to consider.

Assistance may include:

1. **Due date extension** – when will you be able to pay?
2. **Payment by instalments** – when and over what period of time?
3. **Reduced lump sum payment** – what can you afford?
4. **Postpone one or more instalment payments** – when and over what period of time?
5. **Other** – a combination of above

Documentation*

Please provide documentation to support the reason for your request for assistance, which should include several of the following as relevant to your application.

1. Most recent payslip or Centrelink statement (Required).
2. Employer confirmation of loss of employment.
3. Summary of all monthly outgoings, including living costs, debt repayments and any other expenditure.
4. Details confirming any overdue debts, including notices of active debt recovery action, disconnection of essential services and/or eviction.
5. Details confirming any active or pending legal action.
6. Any other information relevant to support the reason for your application.

We may ask for additional information after our initial assessment of your application.

* Please note for privacy reasons, if any of the documents you provide contain any government identifiers, for example a Tax File Number, please blank these out before sending.

Privacy and Declaration

Declaration

I/We declare the information provided in this application form is true and correct

Signature _____

Name (print) _____ Date _____

Signature _____

Name (print) _____ Date _____

Privacy

In this statement "we", "us" and "our" means Lloyd's and ATC Insurance Solutions (ATC) as its agent.

We are bound by the requirements of the *Privacy Act 1988* (Cth), the *Privacy Amendment (Private Sector) Act 2000* (Cth) and the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*. This sets out standards on the collection, use, disclosure and handling of personal information.

Our Privacy Policy is available at www.atcis.com.au or by calling us on the number below.

We, and our agents, need to collect, use and disclose your personal information in order to consider your application for insurance and to provide the cover you have chosen, administer the insurance and assess any claim. You can choose not to provide us with some of the details or all of your personal information, but this may affect our ability to provide the cover, administer the insurance or assess a claim.

We may disclose your personal information to third parties (and/or collect additional personal information about you from them) who assist us in providing the above services and some of these are likely to be overseas recipients in the United Kingdom. These parties which include our related entities, distributors, agents, insurers, claims investigators, assessors, lawyers, medical practitioners and health workers, and federal or state regulatory authorities, including Medicare Australia and Centrelink will only use the personal information for the purposes we provided it to them for (unless otherwise required by law).

Information will be obtained from individuals directly where possible and practicable to do so. Sometimes it may be collected indirectly (eg. from your representatives or co-insureds). If you provide information for another person you represent to us that:

- you have the authority from them to do so and it is as if they provided it to us;
- you have made them aware that you will or may provide their personal information to us, the types of third parties we may provide it to, the relevant purposes we and the third parties we disclose it to will use it for, and how they can access it. If it is sensitive information we rely on you to have obtained their consent on these matters. If you have not done or will not do either of these things, you must tell us before you provide the relevant information.

You are entitled to access your information and request correction if required. You may also opt out of receiving materials sent by us by contacting ATC on (03) 9258 1777 or write to us at Level 4, 451 Little Bourke Street, Melbourne VIC 3000.