



If you're experiencing unforeseen hardship, it's important that you complete this application form as soon and in as much detail as possible. If you have any questions, you can phone us on 0800 870 326 or email loans@mmt.net.nz. We're here to help.

YOUR DETAILS		Consultant <input style="width: 150px;" type="text"/>
<hr/> Last name	<hr/> Last name	
<hr/> First name(s)	<hr/> First name(s)	
Employment <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Not employed	Employment <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Not employed	
Best way to contact you	Best way to contact you	
Loan number if known <hr/>		
PURPOSE FOR APPLYING		
Please tick one <input type="checkbox"/> Illness <input type="checkbox"/> Injury <input type="checkbox"/> Loss of employment <input type="checkbox"/> End of a relationship <input type="checkbox"/> Other		
If other, please specify <hr/>		
Please detail how this is affecting your current financial situation and obligations to the Trust: <hr/> <hr/>		
REQUESTED HELP		
<input type="checkbox"/> Extend the term of your loan, which could have an impact on your regular payments.		
<input type="checkbox"/> Postpone payments for a specified period.		
<input type="checkbox"/> Both of the above (extend the term of the loan and postpone payments for a specified period).		
Please provide details of how long you require assistance for and how this assistance will help you <hr/> <hr/>		
NEXT STEPS		
Once all the information needed for your application has been supplied and you've signed this Unforeseen Hardship Application Form, we'll assess the information provided. If we need any further information, we'll contact you. Applications are processed within 20 working days, provided all the information has been supplied.		
If at any time you have further questions, or if you remember details that may be relevant, please contact our team on 0800 870 326 or email loans@mmt.net.nz		
DECLARATION		
I/We declare that each of us:		
<ul style="list-style-type: none"> • Has read this document and fully answered all questions to the best of our ability • Confirm no relevant information has been withheld • Isn't an undischarged bankrupt, or currently subject to any proceedings under the Insolvency Act 2006 • Consent to Midlands Mortgage Trust retaining the details supplied, and making relevant enquiries about me to enable an application to be processed. 		
BORROWERS		
Full Name <hr/>	Signature <hr/>	Date <hr/>
Full Name <hr/>	Signature <hr/>	Date <hr/>

Turn over to complete



YOUR FINANCIAL POSITION					
Borrower(s) Name(s) _____					
Your Assets		Value	Your Liabilities		Value
House/Section			Mortgage		
1		\$	1		\$
2		\$	2		\$
3		\$	3		\$
4		\$	4		\$
Motor Vehicles			Personal or finance company loans		
1		\$	1		\$
2		\$	2		\$
Bank Accounts			Hire Purchase		Amount Owning
		\$	Company	Expiry	\$
		\$	Company	Expiry	\$
		\$	Company	Expiry	\$
Other Accounts			Overdraft limit		\$
		\$	Credit Cards		Limit
		\$	1		\$
Personal Effects			2		\$
		\$	3		\$
Other		\$	Other loans/Debt		
Total Assets		\$	Total Liabilities		\$
YOUR INCOME AND EXPENDITURE					
Statement of Income		Weekly	Statement of Expenditure		Weekly
Net Salary/Wages			Mortgage repayment 1		\$
1		\$	Mortgage repayment 2		\$
2		\$	Mortgage repayment 3		\$
			Mortgage repayment 4		\$
Rental Income			Personal loan repayments		\$
1		\$			\$
2		\$	Hire Purchase 1		\$
Superannuation		\$	Hire Purchase 2		\$
Benefit/Pension		\$	Hire Purchase 3		\$
		\$			
Accommodation Supplement		\$	Other loans/debt		\$
Working for families		\$			
In Work Tax Credits		\$	Insurance – House		\$
		\$	Contents		\$
Other		\$	Vehicles		\$
Total Income			Total Expenditure		\$