SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Instructions

This form must be completed by the applicant and all related individuals (Business/Company Owners, Directors, Partners, and Individuals if Trustee for a Trust)

- You must complete all questions. If any question is not applicable, please leave the field blank
- Once completed, return the request and all supporting documentation to any Suncorp Bank Branch, or by fax to (07) 3031 2008
- For further assistance, please contact Suncorp Bank on 1800 225 223

Section 1 Company / Business Contact Details

☑ *Please tick appropriate boxes*

Name of your Suncorp Relationship Manager (if any):

TYPE OF BUSINESS

☐ Sole Trader ☐ Partnership ☐ Public Company ☐ Private Company ☐ Other (Please specify)

Registered Company Name or Business Name

Contact Name

Trading Name (only applicable if different from above)

Email Address

Registered Company / Business Address

Suburb

State

Post code

Postal Address (if different from above)

Suburb

State

Post code

Phone Number

Fax Number

Date Business Established: DD / MM / YY

Nature of Business / Principal Activity

Number of Employees

Number of Partners/Directors/Proprietors

Trust Details (if applicable) ☐ Unit Trust ☐ Discretionary Trust

Trust Name

ABN

Trustee

SUNCORP BANK LOAN AND DEPOSIT ACCOUNT NUMBERS

YOUR CURRENT SITUATION

Please provide a brief update of the details of your circumstances and why you are requesting financial assistance.

Now go to **Section 2**, to provide an outline of the type of assistance you are seeking.

Head Office / Bank Use Only Instructions

- Date or branch stamp request upon receipt.
- Scan the request and supporting documentation to **customer.assist@suncorp.com.au** OR fax the request and supporting documentation to 07 3031 2008.
- Enclose this request with supporting documentation in an envelope, and post via internal mail to IPC: RE055. Action the same day you receive this pack from customer.

Accepted By Staff Name:

User ID:

Date Received or Branch Stamp:

Suncorp Metway Limited ABN 66 101 831 722 AFSL 229882 – GPO Box 1453, Brisbane QLD 4001 Ph 13 11 75

SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Section 2 What Assistance Would You Like Us To Consider?

☑ *Please tick appropriate boxes*

Your Request for Business Financial Assistance – Please provide an outline of the assistance you are requesting for your business.

Assistance Options	Specific details of requested assistance
☐ Postponement of loan repayments	For how long?
☐ Extend period of loan contract and reduce amount of each repayment due	Extend, for how long? / Reduced payment $
☐ Extend period of loan contract and postpone repayments	Extend, for how long? / Postpone repayments for how long?
☐ Interest capitalisation	For what period?
☐ Interest only on term loans	For what period?
☐ Waiving of term deposit interest adjustments (break fees) to access deposit funds prior to maturity	Term Deposit / Account Numbers

☐ Other (Please describe what you are seeking, in detail)

Now go to **Section 3**, to complete financial information for each individual associated with the business. If more than 2 individuals associated with the business, attach additional request forms.

Suncorp Metway Limited ABN 66 101 831 722 AFSL 229882 – GPO Box 1453, Brisbane QLD 4001 Ph 13 11 75

SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Section 3 Self Employed Applicant / Director / Trustee / Guarantor

☑ *Please tick appropriate boxes*

Individual 1

Please Tick: ☐ Self Employed Applicant ☐ Director ☐ Trustee ☐ Guarantor ☐ Other

Date of Birth DD / MM / YY

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other

Full Name

Residential Address

Suburb | State | Post code | Time There YRS / MTS | No of Financial Dependents | Age of Financial Dependents

Home Phone Number | Mobile Phone Number | Email Address

Occupation OR If Self Employed, Nature of Business | Employer 1 or Business Name | Employer 1 or Business Phone Number

Employer 1 or Business Address

Suburb | State | Post code | Time There YRS / MTS

If more than 1 Employer, 2nd Occupation | Employer 2 Name | Employer 2 Phone Number

Employer 2 Address

Suburb | State | Post code | Time There YRS / MTS

Weekly Budget

Use annual amounts divided by 52

Individual 1

Weekly Income			Weekly Expenditure	
+ Salary – attach salary slip	**Before Tax Salary**	**After Tax Salary**		**Amount $**
Individual 1 income	$	$	Home loan repayment/s	$
Other income (AUSTUDY, part-time work, dividends, interest, etc) – attach evidence			Personal loan repayment/s	$
			Credit/Store card/s repayment/s	$
	$	$	Other loan (Finance co, Other bank) repayment/s	$
	$	$	Other debt repayment/s	$
Before tax rental income	$		Rent	$
Rental income after expenses		$	Insurance (Life, Health, Home, Car, etc)	$
			School fees	$
+ Self employed applicants	Net Profit	After tax profit	Electricity	$
Profit – attach financial statements	$	$	Gas	$
Total net income per week		$ **0.00**	Telephone	$
			Medical expenses	$
			Rates (Council, Water)	$
			Car / Travel	$
			Food	$
			Clothing	$
			Entertainment	$
			Subscriptions	$
			Other (Superannuation, Gifts, etc.)	$
			Total weekly payments	**$ 0.00**

Budget Summary	
Total net income per week	$ 0.00
Deduct total weekly payment	$ 0.00
Total usable funds	**$ 0.00**

Suncorp Metway Limited ABN 66 101 831 722 AFSL 229882 – GPO Box 1453, Brisbane QLD 4001 Ph 13 11 75

SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Statement of assets and liabilities as at DD / MM / YYYY

Individual 1

Assets	Amount $	Liabilities	Amount $
1 House/property address		1 Loan(s) Lender Repay$ Frequency	
2 Rural/other property name and address/location		2	
3 Plant/machinery/vehicles (details)		3	
4 Stock/work in progress		4	
Bank, building society, credit union a/cs Lender Type of a/c		Unsecured loan(s) Lender Repay$ Frequency	
		Overdraft Lender Limit	
		Bank/Visa/Master/Other Card(s)	
Investments Maturity Date			
		Trade & sundry creditors	
		Income Tax	
Life insurance (surrender value)		Other amounts owing (detail)	
Superannuation (present value)			
Trade & sundry debtors			
Furniture/personal effects			
Other assets (detail)			
Total	0.00	Total	0.00

Lease(s)

Lender	Equipment	Rental $	Frequency	Lease Expiry Date	Residual $

Surplus/Deficiency of assets over liabilities	$ 0.00

IMPORTANT NOTE: Suncorp Clear Options Credit Cardholders Only

As Citigroup Pty Ltd ("Citigroup") is the credit provider of the Suncorp Clear Options Credit Card product, a copy of this Request for Financial Assistance and any supporting documentation will be provided to Citigroup for their independent assessment in respect to the Suncorp Clear Options Credit Card you may have with them. Suncorp and Citigroup will independently assess and respond to your Hardship Request based on the information provided in your Request for Financial Assistance and any supporting documentation. If you do not want Suncorp to provide this material to Citigroup please indicate below. Please note, Suncorp has no ability to vary arrangements in place with Citigroup. ☐ I hereby request that Suncorp does not provide a copy of this Request for Financial Assistance and any supporting documentation to Citigroup. I do not want Citigroup to receive a Hardship Request from me.

Citigroup Pty Limited ABN 88 004 325 080 AFSL No. 238098 ("Citigroup") is the credit provider and issuer of Suncorp Clear Options Credit Cards. Suncorp-Metway Ltd ABN 66 010 831 722 ("Suncorp") promotes and distributes Suncorp Clear Options Credit Cards on Citigroup's behalf under an agreement with Citigroup. Suncorp will not guarantee or otherwise support Citigroup's obligations under the contracts or agreements connected with the Credit Cards (other than those relating to Suncorp internet banking and telephone banking).

SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Section 3 Self Employed Applicant / Director / Trustee / Guarantor

☑ *Please tick appropriate boxes*

Individual 2

Please Tick: ☐ Self Employed Applicant ☐ Director ☐ Trustee ☐ Guarantor ☐ Other

Date of Birth DD / MM / YY

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other

Full Name

Residential Address

Suburb | State | Post code | Time There YRS / MTS | No of Financial Dependents | Age of Financial Dependents

Home Phone Number | Mobile Phone Number | Email Address

Occupation OR If Self Employed, Nature of Business | Employer 1 or Business Name | Employer 1 or Business Phone Number

Employer 1 or Business Address

Suburb | State | Post code | Time There YRS / MTS

If more than 1 Employer, 2nd Occupation | Employer 2 Name | Employer 2 Phone Number

Employer 2 Address

Suburb | State | Post code | Time There YRS / MTS

Weekly Budget

Use annual amounts divided by 52

Individual 2

Weekly Income			Weekly Expenditure	
+ **Salary** – attach salary slip	**Before Tax Salary**	**After Tax Salary**		**Amount $**
Individual 2 income	$	$	Home loan repayment/s	$
Other income (AUSTUDY, part-time work, dividends, interest, etc) – attach evidence			Personal loan repayment/s	$
			Credit/Store card/s repayment/s	$
	$	$	Other loan (Finance co, Other bank) repayment/s	$
	$	$	Other debt repayment/s	$
Before tax rental income	$		Rent	$
Rental income after expenses		$	Insurance (Life, Health, Home, Car, etc)	$
			School fees	$
+ Self employed applicants	Net Profit	After tax profit	Electricity	$
Profit – attach financial statements	$	$	Gas	$
Total net income per week		$ **0.00**	Telephone	$
			Medical expenses	$
			Rates (Council, Water)	$
			Car / Travel	$
			Food	$
			Clothing	$
			Entertainment	$
			Subscriptions	$
			Other (Superannuation, Gifts, etc.)	$
			Total weekly payments	**$ 0.00**

Budget Summary	
Total net income per week	$ 0.00
Deduct total weekly payment	$ 0.00
Total usable funds	**$ 0.00**

Suncorp Metway Limited ABN 66 101 831 722 AFSL 229882 – GPO Box 1453, Brisbane QLD 4001 Ph 13 11 75

SUNCORP BANK

Request for Financial Assistance (Business Applicants Only)

Statement of assets and liabilities as at DD / MM / YYYY

Individual 2

Assets	Amount $	Liabilities	Amount $
1 House/property address		1 Loan(s) Lender Repay$ Frequency	
2 Rural/other property name and address/location		2	
3 Plant/machinery/vehicles (details)		3	
4 Stock/work in progress		4	
Bank, building society, credit union a/cs Lender Type of a/c		Unsecured loan(s) Lender Repay$ Frequency	
		Overdraft Lender Limit	
		Bank/Visa/Master/Other Card(s)	
Investments Maturity Date			
		Trade & sundry creditors	
		Income Tax	
Life insurance (surrender value)		Other amounts owing (detail)	
Superannuation (present value)			
Trade & sundry debtors			
Furniture/personal effects			
Other assets (detail)			
Total	0.00	Total	0.00

Lease(s)

Lender	Equipment	Rental $	Frequency	Lease Expiry Date	Residual $

Surplus/Deficiency of assets over liabilities	$ 0.00

IMPORTANT NOTE: Suncorp Clear Options Credit Cardholders Only

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Request for Financial Assistance (Business Applicants Only)

Section 4 Your Supporting Information & Signatures

What I may need to provide with this financial assistance request?

1. Statements for all non Suncorp Bank Loans, Credit Cards or Vehicle finance.
2. Confirm all business owners, guarantors and partners to the loan/s have signed this form.
3. Any other information or documentation you believe relevant to assist us in assessing your request.
4. You must also provide:
   a. An aged listing for debtors and creditors
   b. Last full 12 months financial year financials (Profit and Loss, and Balance Sheet)
   c. Latest available internal management accounts
   d. Details of any repayment arrangement entered into with suppliers or customer
   e. Confirmation current tax liabilities are up to date, or if not, details of any deficiencies in tax payments.

What happens next?

- You need to send this completed request and supporting documents to Suncorp
  - Suncorp Bank Customer Assist
    IPC: RE055, GPO BOX 1453, Brisbane QLD 4001
  - Fax 07 3031 2008
  - Email **customer.assist@suncorp.com.au**
- We'll review the documentation and contact you to discuss your request in detail.
- If we determine other additional information is required, we will contact you.
- All requests for financial assistance are subject to a case by case assessment.

Your Contacts for Suncorp Bank Financial Assistance:

- Phone 1800 225 223
- Fax 07 3031 2008
- Email customer.assist@suncorp.com.au

Appointment of an Agent

I/We appoint the person below and any organisation under which the agent may operate or by whom the agent may be employed or their assigns, to be my agent for the purpose of exchanging information with Suncorp Bank in relation to this request for financial assistance.

Agent Details

Accountant Name

Telephone

Financial Counsellor Name

Telephone

Other Agent (Describe Role)

Telephone

Acknowledgements and Declaration

By signing below, I/we agree that I/we

- have read and understood the particulars which have been completed in this request for financial assistance and confirm that the particulars (including any supporting documents) are true, complete and correct and have been provided to Suncorp Bank to enable it to determine whether or not to vary the borrowers credit contract/s;
- agree to Suncorp Bank collecting, using and disclosing my/our personal information, including health and sensitive information if applicable, in accordance with the Suncorp Privacy Policy;
- authorise Suncorp Bank to make any enquiries it considers necessary to verify the information provided in this request and in support of my/our request for financial assistance;
- authorise Suncorp Bank to make enquiries with my/our employer/s, accountant and if applicable, landlord/real estate agent in order to confirm the accuracy of information provided by me/us in this request for financial assistance;
- understand that it may be necessary for Suncorp Bank to disclose certain information about me/us to regulatory and government bodies, our agents, credit and debit agencies and mortgage insurers when assessing this request for financial assistance;
- authorise Suncorp Bank to exchange information concerning my financial affairs with any person/s I have appointed as an agent to act on my behalf;
- authorise Suncorp Bank to disclose to a guarantor/s any financial particulars relating to my/our accounts with Suncorp Bank and any financial information within the knowledge of Suncorp Bank in relation to the borrowers affairs.

Acknowledgements and Declaration on Behalf of Borrowing Entity

APPLICANT 1 (Nominated in section 3)

Please Tick: ☐ Partner ☐ Director ☐ Owner ☐ Individual (as Trustee) ☐ Guarantor

Signature

Date

DD / MM / YY

APPLICANT 2 (Nominated in section 3)

Please Tick: ☐ Partner ☐ Director ☐ Owner ☐ Individual (as Trustee) ☐ Guarantor

Signature

Date

DD / MM / YY

Acknowledgements and Declaration on Own Behalf

APPLICANT 1 (Nominated in section 3)

Signature

Date

DD / MM / YY

APPLICANT 2 (Nominated in section 3)

Signature

Date

DD / MM / YY