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 require	ed?			
Attach any items listed below that will support your application.				
Last 2 years Tax Returns or Profit and Los	s Statements and a curre	ent balance sheet		
Medical certificate or any relevant medic			urrent 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 y	our application			
Business Housing, Investment or	Equity			
Business Details (Non-Personal Applica	ants)			
Business Name				
ABN	ACN/ARBN		Business Start Date dd / mm	n / уууу
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 a	t current address)			
			Postcode	State
Business Contact Information – Tick pr	referred contact met	hod		
Business phone no		Business fax no		
After hours no		Mobile phone no		
Business email		Personal email		
Business Ownership - Proprietors, Shar	reholders, Beneficiar	ies		
Full name	Position		Ownership %	
Full name	Position		Ownership %	
A				
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		
	e 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 Mobil	e 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	\$	
Ass	ets	Liabi	lities	
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 Owing	Credit Limit	Minimum Monthly Payment	
	\$		\$	\$	\$	
Jointly with:		Jointly with:	Jointly with:			
	\$		\$	\$	\$	
Jointly with:		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 Owing	Credit Limit	Minimum Monthly Payment	
	\$		\$	\$	\$	
	\$		\$	\$	\$	
	\$		\$	\$	\$	
Total value of property assets	\$	Total Value of r	nortgages	\$		
Investments		Other debts (ir	Other debts (including debts you have guaranteed)			
Superannuation	\$	Description (ou	Description (outstanding rates/insurance etc) Amount ow		Amount owing	
Shares	\$		\$			
Total value of investments/ shares	\$	Jointly with:	Jointly with:			
Other assets		\$			\$	
Contents	\$	Jointly with:	Jointly with:			
Boat/Caravan	\$	\$				
Time Share	\$	Jointly with:				
	\$	Total value of other debts \$			\$	
	\$	Credit/store cards				
Total value of other assets	\$	Organisation	Amount Owing	Credit Limit	Minimum Monthly Payment	
Bank accounts			\$	\$	\$	
Organisation	Value		\$	\$	\$	
	\$		\$	\$	\$	
	\$		\$	\$	\$	
	\$		\$	\$	\$	
Total value of bank accounts	\$	Total value of c	Total value of credit/store cards \$			
Total value of assets A	\$	Total value of liabilities B		\$		
NET POSITION A MINUS 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.

 $\label{thm:please describe} Please describe why you are unable to meet your financial obligation? (e.g. illness, loss of employment)$

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)	1			
Name		After tax		
	\$			
	\$			
	\$			
	\$			
Rental income				
Address	Net rental			
		\$		
		\$		
		\$		
Total Assets	А	\$		
Monthly Expe	nses - 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	В	\$		
Total net monthly income	Α	\$		
Less total monthly commitments	В	\$		
TOTALSURPLUS FUNDS	A MINUS B	\$		



Dequest for financial assistan				
Request for financial assistance				
I/We request assistance on the	following accounts:			
Account/Product type		Account Number		
Limited ABN 32 009 656 740 AFSL a	325 080 ACL No 238098 ('Citigroup') is the cr nd ACL No 244616 ('BOQ') distributes BOQ C 2 does not guarantee or otherwise support Ci on for credit card assistance.	redit Cards under an agreeme	ent with Citigroup. Citigroup and BOQ	
Offer to repay				
Account Number	Amount Offered	Payment F (weekly, fo	requency ortnightly, monthly)	
	\$			
	\$			
	\$			
	\$			
	\$			
Arrangements with other credit properties of each credit properties of each credit details of each credit properties of each credit details detail	oviders provider, the associated loan/s and details of	f any assistance that is currer	ntly in place.	
	e for your loan/s? e for these facilities, please provide their na nis is not applicable for Credit Card products.	me and have them sign the	acknowledgement at the end of this	
Title	Full Name			
Title	Full Name			
Reminder: Please have the guaranto	or 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 BOO 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	d/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/yyyyy
Applicant 2 signature	
X	
	Date dd/mm/yyyy
A guarantor can individually apply for financial assistance. Only one guaranties application is being made by a single guarantor.	antor's signature is required within the Guarantor signature blocks below if
	plication for financial assistance. Should the application be approved, I am/ges to the applicant/s loan/s and I/we may be required to sign documents
Guarantor 1 signature	
Y	
^	Date dd/mm/yyyy
Guarantor 2 signature	
Y	
^	Date dd / mm / yyyyy

