## MEGACASHGO

#### You can send us your completed application form by email or to our postal box:



hardship@megacashgo.com.au



PO Box: Q1168 Queen Victoria Building NSW 1230

### Section 1: Personal Information

Full Name			
Date of Birth			
Phone Number <sub>:</sub>			
Email			
Marital Status			
No. of dependant			

### **Employment Status**

Contract	Full time	Part time Casual
Pensioner	Self employed	Unemployed Temporary
Student	Seasonal	Stood down without payment
Employment Industr	гу	
Accommodation	Administrative and support services	Agriculture, forestry Contruction
Arts and rereation services	Education and training	Electricity, gas, water and waste services
Food services	Health care and social assistance	Information, media and telecommunications
Manufacturing	Mining	Professional, scientific and technical services
Public administration and safety	Rental, hiring and real estate services	Retail trade
Transport, postal and warehousing	Wholesale trade	Other services

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### Section 2: Reason for applying for financial assistance

#### Main reason for seeking financial assistance

Unemployment	Medical Illness	Reduced Income	Over-Commitment
Parental Leave	Separation/Divorce	Death/ Bereavement	Domestic Violence
Unexpected/One- off expense Other	Permanent Disability	Covid-19	Natural Disaster
When did your finan	cial circumstances c	hange?	

Between 6 and 12

months

Please let us know briefly about your situation and reasons for seeking financial assistance.

Between 3 and 6

months

### Section 3: Other financial institutions

Do you have any loans or credit cards with other lenders?

Yes No

More than 12 months

ago

#### If answered yes, please list them below

Less than 3 months

ago

	Name of credit providers	Credit limit	Current account balance	Minimum repayment
Mortgage		\$	\$	\$
Personal loans		\$	\$	\$
Carloan		\$	\$	\$
Credit cards		\$	\$	\$
Credit cards		\$	\$	\$
Investment mortgage		\$	\$	\$
Personal overdraft		\$	\$	\$
Business loam		\$	\$	\$
Other		\$	\$	\$
			Total balance owned	\$

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### Section 4: Your income

#### Please insert the monthly amount for each expense.

	Amount
Income after tax including salary/ self-employment income, bonus, overtime, dividens/interest income	\$
Centrelink income	\$
Other income	\$
Residential or commercial rental income	\$
Monthly total income	\$

### Section 5: Your expenses

### Please insert the monthly amount for each expense.

	Amount
Rent	\$
Utilities (Water, gas, electricity bills for your home)	\$
Groceries	\$
Public transport and vehicle expenses	\$
TV and communications (Mobile phone, internet, subscriptions)	\$
Health (Health insurance, fitness, dental, doctor fees, etc.)	\$
Personal insurance (Life and income replacement insurance)	\$
Lifestyle (Entertainment, hobbies and recreation)	\$
Household (Rates, home and content insurance, repairs etc.)	\$
Personal (Clothing and shoes, haircuts, cosmetics)	\$
Property investment	\$
Childcare and public education	\$
Private education	\$
Child spousal maintnance	\$
Other	\$
Monthly total living expenses	\$

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### Section 6: Your assets

	Assets	Value
House property	Address:	\$
Other assets	Details:	\$
		\$
(Superannuation, car, rental property, etc.)		\$
	Total assets	\$

### Section 7: Customer declaration



Please tick the following box to confirm that the information completed above is true and correct.