

Head Office:

PO Box 588 WYONG 2259 PH: (02) 4355 4027 FAX: (02) 4355 4160

EMAIL: allparks@allparks.com.au

ABN 25 151 703 525 AFSL 494836 A Specialist Underwriting Agency

Financial Hardship Application Form

If you have any questions about the process, or if you require assistance to complete this application, please contact All Parks Insurance on (02) 4355 4027 (Our office hours are Monday – Friday, 9am to 5pm except Public Holiday)

<u>Appl</u>	<u>licant</u>
Appl	icant:
Brok	erage:
Post	al Address:
State	e: Post Code:
Cont	act number:Email:
<u>Harc</u>	Iship Details: Circumstances of Hardship
Please explain the reason for your application:	
Natu	ure of Assistance
Wha	t assistance would you like All Parks Insurance to consider?
	Extension of due date for payment. If so when are you able to make Payment?
	Paying In instalments. What can you afford, how often & over which period?
	Paying a Reduced lump sum. What can you afford?
	Other.