



W A Emergency Services Volunteers Hardship Assistance Scheme Incorporated

Claim

TO: Member Association Executive

RE: WA Emergency Services Volunteers Hardship Scheme

Dear Association Executive

Further to your decision to submit an application for assistance from the WAESVHAS, please find attached the Hardship Scheme Application Pack, consisting of two sections to assist you in preparing the Application for the member of your association.

Please note that an Association Representative is required to complete the sign off on page 8, to indicate that they support this application and they consider that the Applicant, or his/her immediate families, circumstances warrant assistance from the Hardship Assistance Scheme.

Page 3 of this document describes 'The Application Process' in detail. Please note that the **Claim Number is unique to this particular 'Application Pack'** and the 'Application Pack' cannot be reused for any other application. Each individual 'Application Pack' will be issued by the WAESVHAS Secretary to ensure a new case number is allocated to each claim.

The remaining pages are 'The Application Forms'. This is a multiple page document where full details of the applicant and their personal circumstances must be completed for the application to continue to the deliberation phase.

There are 2 types of claim available to the Volunteers;

1. A full claim to the value of \$6000.00. In order for this to be paid the form needs to be completed in FULL, including the Personal Budget forms at the back of the Application Form. This will enable the WAESVHAS Committee to assess the claim quickly and fairly.
This will also assist the claimant to forward plan for their personal financial circumstances.
2. An "Emergency Claim" to the value of \$2000.00. To claim this a personal budget is not required, however the more information provided will make it easier for the Management Committee to quickly assess the claim.

If assistance being sought is for outstanding accounts, copies of these accounts must be enclosed with the application. If funds are sought for overdue mortgage, loan or rent repayments etc., copies of written evidence and documentation of outstanding amounts relating to rental or loan agreements, must be enclosed with the application before the Committee can consider approving a claim.





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NOTE: Should you need more room to provide the Committee with details of the application, please attach additional page(s). The WAESVHAS Management Committee members make their decisions based on the information supplied, therefore it is vital that full details presenting the applicant's circumstances and the assistance sought, are provided. This allows the Committee to make an informed decision in a timely manner.

Should you have any questions regarding completing the Application, please contact the Scheme's Secretary by email: secretary@waesvhas.org.au

The WAESVHAS Committee need to be able to justify any approved assistance to comply with the Guidelines & Governance Rules of the Fund.

Please be advised that all Applications are treated in the strictest confidence and it is our intent to process the matter as quickly as possible.

Lloyd Bailey AFSM
CHAIRPERSON





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Claim

The Process:

- Association Representative considers the circumstances and eligibility of the claim and then requests a Hardship Assistance Scheme Application Pack from the Hardship Assistance Scheme Secretary.
- The Application is completed, IN FULL, by the Association Representative in collaboration with /or on behalf of the claimant, **the claimant must make and sign the declarations.**
- Particulars of the case must clearly describe the claimant's personal situation and how a payment will best support your member. This will assist the Hardship Assistance Scheme Management Committee to make an informed and fair determination.
- Any correspondence or contact by the Hardship Assistance Scheme Secretary will be directed only to the Association not the Applicant, as the Association is the member of the Scheme and is therefore making the application on behalf of its member.
- The Association will be expected to follow up with the applicant if further information is requested by the Committee of Management, and once the Committee has reached a decision in regard to the application, the Association is required to advise the member of the Committee's decision.

Applications being lodged must include all of the following:

- Why funds are being sought;
- A summary of funds requested;
- Details of any previous funding the member has received from either the WA Emergency Services Volunteers Hardship Assistance Scheme or any other fund/welfare support agencies;
- Full details of financial circumstances of the member/spouse/partner to determine their Nett position when factoring in income versus expenses. Asset & Liability forms are attached to back of Claim form and must be attached to claim form;





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- Full details of any other financial assistance in receipt of, or in the process of applying for, including compensation through DFES, or any other agency or organisation. Please attached relevant documents;
- Any other details that may verify the financial situation of the member;
- Proper supporting documentation such as outstanding accounts, medical certificates, bank statements, witness reports, rental agreements etc. (In some circumstances, an applicant may be requested to submit a signed Statutory Declaration if the Hardship Assistance Scheme Committee consider insufficient evidence or proper documentation has been provided with the application.) Please provide copies as Originals will not be returned;
- 3rd Party/Partners consent signed in the case of any other person who is being identified in this Application.

(Should the Association Representative feel uncomfortable in dealing with personal details of the Applicant or are the subject of the application, please contact the Hardship Assistance Scheme Secretary for advice and assistance).

- Completed applications are to be verified and signed by both the Association Representative and the claimant. Where the claim is in the name of the Association Representative the next senior officer of the Association will be required to verify and sign the application.
- Verified applications along with ALL supporting documentation is to be forwarded to the Scheme Secretary by the member Association Representative.
- Please provide only copies of any documentation (no originals), as all documents will be retained for auditing purposes.
- The Scheme Secretary will review the application and, if required may seek clarification or more information. All communications to seek such information to assist the Committee in its deliberations will be to the Member Association Representative that submitted the Application.
- The Scheme Secretary will on-forward the fully completed application with all supporting documentation to the WA Emergency Services Volunteers Hardship Assistance Scheme Committee of Management for their consideration.





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- The WA Emergency Services Volunteers Hardship Assistance Scheme Management Committee considers all applications to determine whether the application is in accordance with the Fund Rules. In accordance with these rules the Committee reserves their right to decline payment from the Fund.
- In accordance with the Fund Rules, in the event of an application being declined, a reason for such decline will not be divulged.
- In accordance with Fund Rules, any grant of money following consideration of application will be made directly to the Applicants Brigade, Group or Unit or where the claim is for outstanding Accounts, these will be paid by the Scheme. Fund Rules do not allow direct payments to applicants.
- As part of any assistance provided to an applicant there may be a requirement for him/her to seek ongoing advice from a qualified financial management agency.
- Attach information in regards to any other financial assistance applied for and exhausted by the applicant.
- Processing of application will be completed as quickly as possible, however from receipt of a FULLY completed application, normal processing and decision is usually within 7 days, but may take up to 14 days.
- Association Representative must advise Hardship Assistance Scheme Secretary immediately of any change in claimant's circumstances.





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Application for Hardship Assistance

Claim #

Applications must be seeking assistance for a Western Australian Emergency Service volunteer who is a volunteer member of an Emergency Services group created under the *Fire and Emergency Services Act 1998*, the *Bush Fires Act 1954*, or the *Fire Brigades Act 1942* and who has served a minimum of six months as a volunteer. Applications may also be seeking assistance for a surviving dependent of an eligible volunteer (if death has occurred within a 12month timeframe).

Applicant Details

Name:

Address:

Phone Number:

Date of Birth:

Volunteer Association:

DFES ID Number:

Name of B/G/U/S:

Dependent Details

Name	Age	Relationship

Employment Details

Applicant	
Applicant's Partner (where applicable)	

If the applicant is the surviving dependent (including spouse) of an eligible volunteer,





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please provide the name of that eligible volunteer and the date on which he/she deceased:

Identification of Hardship

1. Financial hardship is defined as the inability to meet minimum living expenses because of unexpected or unforeseen events.

Cause of hardship: (please tick appropriate box)

Loss of work or reduction of work hours

Illness/death of a family member

Relationship breakdown

Accidental injury or illness

Emergency event or natural disaster

Other – Please state

2. Please use the space below to outline why the cause of your hardship has impacted on your ability to meet expenses. If relevant, please attach evidence that your income has reduced to the extent that expenses cannot be met.

3. What expenses do you require financial (hardship) assistance to cover?





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(i.e. ability to meet expenses). Please use the space below to outline when it is expected that normal circumstances will return and what strategies have been put in place (e.g. financial or other recovery plan, financial counselling) to assist with a return to normal circumstances.

Alternative sources of assistance

6. Please provide details about any alternative sources of financial assistance (e.g. other grants, loans) and whether access to these sources has been considered, applied for or granted. If alternative sources of assistance exist but have not been applied for, please outline the reasons why not.

Insurance

7. Do you have insurance (e.g. income protection) which covers you for the circumstances as a result of which you are applying for hardship assistance? If not insured, are you covered by any form of statutory coverage or protection (e.g. worker's compensation, compulsory third-party insurance)? If yes to either, please provide details.





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Previous hardship

8. Has any financial assistance been received for this hardship or a previous hardship?

YES / NO

If 'yes', please provide details (including amounts received):

Income, Expenses, Assets & Liabilities

9. Please provide an indication of your monthly income and expenses and your assets and liabilities, to assist the Assessment Committee's consideration of your application. The 'personal budget calculator' attached to this application form should be used to help you with your calculations and attached to the claim.





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Total monthly income

Total monthly expenses

Income less expenses

Total assets

Total liabilities

Assets less liabilities

Acknowledgement

- I acknowledge that the funds I have applied for represent only that portion not covered by insurance, statutory coverage, or by assistance provided elsewhere;
- I acknowledge that, should I have applied for funding as a result of a loss of employment, accounts in arrears will only be considered for payment after 90 days (following the loss of employment);
- I acknowledge that I may be required, as a condition of assistance, to undertake compulsory financial counselling and education;
- I acknowledge that decisions made by the ESVHAS Committee are final and cannot be appealed;
- I acknowledge that the ESVHAS Committee is not required to provide explanations for its decisions;
- I acknowledge that funds paid out of the Hardship Assistance Scheme may be provided directly to a service provider;
- I acknowledge that in cases where funds are deposited into my Brigades bank account, it is necessary for me to provide the ESVHAS Committee with receipts which prove that I used the funds as intended

Application checklist

Discussion had with member (volunteer) Association

Association has confirmed eligibility after considering all circumstances against the *Administration Guidelines*

Application form completed (including with supporting documentation where necessary)

Application form signed-off by Association





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3rd Party Consent

I _____ the undersigned consent to my personal information being disclosed for this WA Emergency Services Volunteers Hardship Assistance Scheme application.

Signed: _____ Witnessed: _____

NAME: _____

Applicant declaration and signature

Signature:

Date:

Association sign off

Association

Name

Authority signatory

Position

Date





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Committee Use Only

Date received by ESVHAS Secretary
Date application considered by panel
Panel decision
Explanatory notes

Signature of ESVHAS secretary
Name

Pro Forma





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Personal budget calculator

Name (applicant): _____

As at Date: _____

Assets	Estimated Value	Monthly Return/Income	Total Income
Home	\$	\$	\$
Holiday Home	\$	\$	\$
Rental Property	\$	\$	\$
Other Property	\$	\$	\$
Motor Vehicles:			
1.	\$	\$	\$
2.	\$	\$	\$
3.	\$	\$	\$
Boat	\$	\$	\$
Caravan	\$	\$	\$
Other Plant/Equipment	\$	\$	\$
Furniture	\$	\$	\$
Jewellery	\$	\$	\$
Shares	\$	\$	\$
Managed Investments	\$	\$	\$
Term Deposits	\$	\$	\$
Other Bank Accounts	\$	\$	\$
Other Assets	\$	\$	\$
a. Sub-total	\$	\$	\$
	Claimant	Partner	Total
Wages (Monthly Gross)	\$	\$	\$
Pensions	\$	\$	\$
Other Benefits	\$	\$	\$
Other Income	\$	\$	\$
b. Sub Total	\$	\$	\$
c. Total Income (a + b)	\$	\$	\$





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Liabilities	Estimated Value	Monthly Repayments	Total Expenses
Mortgages	\$	\$	\$
Investment Loans	\$	\$	\$
Personal Loans	\$	\$	\$
Rent/Board	\$	\$	\$
Building Maint/Repair	\$	\$	\$
Vehicles & Equipment			
Maint/Repairs	\$	\$	\$
Fuel	\$	\$	\$
Registration/License	\$	\$	\$
Insurance			
Building/Contents	\$	\$	\$
Vehicles/Equipment	\$	\$	\$
Medical	\$	\$	\$
Life	\$	\$	\$
Other	\$	\$	\$
Utility Costs			
Water	\$	\$	\$
Power	\$	\$	\$
Gas	\$	\$	\$
Rates	\$	\$	\$
Other	\$	\$	\$
Communications (Phone, etc)	\$	\$	\$
Investments – Fees	\$	\$	\$
Medical/Dental/Chemist	\$	\$	\$
Education (Fees, Books, etc)	\$	\$	\$
Food/Clothing	\$	\$	\$
Other Household Costs	\$	\$	\$
Sport	\$	\$	\$
Social/Entertainment	\$	\$	\$
Other Expenses	\$	\$	\$
d. Total Liabilities	\$	\$	\$

Summary

c. Total Assets	\$	Total Income	\$
d. Total Liabilities	\$	Total Expenses	\$
Net Assets Less Liabilities	\$	Income Less Expenses	\$

