



Sections 85 and 87 of the Local Government (Rating) Act 2002

3 (B) REMISSION – NEAR OWNERSHIP SITUATIONS

Objectives of the policy

The objective of this policy is to assist ratepayers experiencing extreme financial hardship which affects their ability to pay rates.

Conditions and criteria

1. Property held in trust

- The amount of the remission will be equal to the Council's Uniform Annual General Charge.
- The applicant may have savings up to a maximum of \$10,000 for the purpose of funeral expenses.
- The applicant's sole income is from a Central Government benefit (including New Zealand superannuation) and earnings on interest from savings for funeral expenses.
- The applicant must be the ratepayer and supply proof from the Trust Deed.
- The applicant must not be a financial beneficiary of the Trust.
- The applicant must not be eligible for a rates rebate.
- The applicant must provide an explanation and proof of hardship.
- The Rating Unit must be rated as Residential.
- The applicant must reside at the property.

2. Habitat for Humanity

- The amount of the remission will be equal to the Council's Uniform Annual General Charge.
- The applicant must provide proof of the long-term sale and purchase agreement for the property with Habitat for Humanity.
- The applicant's sole income is from a Central Government benefit or their income is at or below the Central Government equivalent benefit and proof of income is supplied.
- The property must not be eligible for a rates rebate.
- The applicant must provide an explanation and proof of hardship.
- The Rating Unit must be rated as Residential.
- The applicant must reside at the property.

Property details

Valuation number

Property identification
number

Property address

Owner/applicant details

Owner details

First name(s)

Surname

Applicant details
(if different to above)

First name(s)

Surname

Postal address

Contact phone

Contact email

Application details – please provide supporting documentation

Applicant's signature

Name of applicant

Signature of applicant

Date _____

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