

# Repayment Form



**Work and Income**  
Te Hiranga Tangata

A service of the Ministry of Social Development

CLIENT NUMBER

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## Please read this before you start

This form provides you with different options on how you can repay Work and Income.

**Please complete all questions – if not applicable write N/A.**

## Personal details

**Q2 note:** Give any other names that you use now or have used in the past (including your maiden name).

**Q4 note:** Please give your house number, street, suburb, and town or city.

A house number could include:

- street number
- fire number
- RAPID number
- emergency services number.

**Q5 note:** Mailing address includes:

- street address
- postal box (PO Box)
- rural delivery details
- C/O address.

**Q8 note:** A partner is your spouse (husband or wife), your civil union partner, or a person of the same or opposite sex with whom you have a de facto relationship.

### 1. What is your name?

First name(s)

Surname or family name

### 2. Are you known by or have you used any other names?

No

Yes

▶ Please give details below:

1.
2.

### 3. What is your date of birth?

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Day      Month      Year

### 4. Where do you live?

Flat/house no.

Street name

Suburb

City

### 5. What is your mailing address (if different from above)?

If you live at a rural address please include your rural delivery details here:


### 6. How can we contact you?

Work phone

Home phone

Mobile phone

Email

Fax

### 7. Do you have dependent children in your care?

No

Yes

▶ If YES, how many?

### 8. Do you have a partner?

No

Yes

## Employment

**9. Are you self-employed?**

No  Yes ▶ Go to Question 16

**10. Are you currently working?**

No ▶ Go to Question 16  Yes

**11. What is the name of the business you work for?**

**12. Where is the business located?**

Street number  Street name

Suburb  City

**13. What is the postal address?**

PO Box no.  Suburb  City

**14. What is the name of your employer/payroll officer?**

**15. How can we contact your employer/payroll officer?**

Work phone  Fax  Mobile phone


Email

## Income

**Q17 note:** Examples of income include:

- wages or salary
- accident compensation
- farm or business income (include drawings)
- self employment
- interest from savings or investments
- dividends from shares
- income from rents
- redundancy or termination type payments
- Child Support
- maintenance payments
- income from boarders
- Student Allowance, scholarship or Student Loan living cost payments
- any other income, eg family trusts, overseas payments
- New Zealand Superannuation.

Give gross (before tax) amount.

 You may need to provide proof of this income.

**16. How much is your weekly wage after tax?**

\$

**17. Do you and/or your partner have any other income?**

No  Yes ▶ Please provide details below:

Source (eg name of employer)	You	Your partner	How often (eg weekly, fortnightly etc)
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

# Repayment arrangement

**Q18 note:** You must make either a:

- lump sum payment
- regular weekly, fortnightly or monthly payment, or
- combination of both.

**18. Would you like to pay a lump sum?**

No

Yes ▶ I agree to pay Amount \$  on Date of payment     
Day Month Year

**19. Would you like to make regular payments?**

No

Yes ▶ I agree to pay Amount \$

**20. How often will you pay?**

Weekly  Fortnightly  Monthly

**21. What will be the date of your first payment?**

Day Month Year

**22. How will you pay?**

Automatic payment  Deduction from wages  
 Internet banking  Cash/cheque at NZ Post  
 Benefit deduction

**23. Would you like any part of this payment credited to any amount your partner owes us?**

No

Yes ▶ How much do you want to pay? \$

▶ What is your partner's client number?

# Confirmation

A signature is not required if this form is being sent by email.

**I confirm that:**

- The information I have supplied is true and complete.
- I have reviewed my financial situation and can afford these repayments.
- I understand that the Collections Unit may seek to confirm this information from other sources.
- I understand the Collections Unit will review my proposal and advise me of the outcome.
- I understand that if I don't make the payments as arranged, other action may be taken to recover the money owing.

Name (print)

Client's signature

Day Month Year