

## Initial Financial Hardship Application Details

Complete this form as an initial step to be considered for a financial hardship arrangement with MEDIONmobile and send to one of the following addresses:

<b>Letter:</b> Reply Paid 89495 MEDION Australia CHATSWOOD NSW 2067
<b>Fax:</b> 02 9478 0291
<b>Email:</b> <a href="mailto:feedback@ALDI mobile.com.au">feedback@ALDI mobile.com.au</a>

Your Name <sup>1</sup> :	Note that only an ALDI mobile customer, or their authorised representative, may submit this application.
ALDI mobile account name:	
Your relationship to the account holder (select one) <sup>2</sup> :	Account holder / Authorised Representative of our customer Must be in name of same person as above, unless person above is their authorised representative.
Your contact number:	
Your postal address:	
Your email address:	
Your ALDI mobile account or mobile number(s)	
ALDI mobile invoice details your application relates to <sup>3</sup> :	Clearly identify each invoice that presents payment difficulties including following as applicable: name of invoiced party, date, invoice number, amount, service type.
Detail of Financial Hardship (you may be requested to provide evidence to support this. Attached additional page if necessary) <sup>4</sup> :	<sup>4</sup> Refer to ALDI mobile Financial Hardship Policy for information on qualifying circumstances
What type of assistance are you seeking and for how long?	How can we help you?
Do you have an existing Financial Hardship arrangement with ALDI mobile?	If yes, provide details including date of arrangement:

I wish to make an application for a Financial Hardship Arrangement with ALDI mobile.  
Please contact me regarding this:

Signature	
Date	/ /