



TIG Telecom

Schedule A: Initial hardship application details

Your name ¹	
TIG Telecom account name ²	
You are	our customer / authorised representative of our customer ³
You are	⁴ a residential customer / a small business customer ⁵
TIG Telecom invoice details your application relates to ⁶	
Details of financial hardship ⁷	
Do you have an existing financial hardship arrangement with TIG Telecom ?	Yes / no ⁸
If 'yes', details ⁹	
Your contact number	
Your contact postal address	
Your contact email address	

I wish to make an application for a financial hardship arrangement with TIG Telecom. Please contact me about this matter.

Your signature	_____
Date	

¹ Note that only a TIG Telecom customer, or their authorised representative, may submit this application.
² Must be in name of same person as above, unless person above is their authorised representative.
³ Circle whichever applicable.
⁴ Circle whichever applicable.
⁵ As per TIG Telecom Financial Hardship Policy.
⁶ Clearly identify each invoice that presents payment difficulties including following as applicable: name of invoiced party, date, invoice number, amount, service type.
⁷ Refer to TIG Telecom Financial Hardship Policy for information on qualifying circumstances.
⁸ Circle whichever applicable.
⁹ Including date of arrangement if known.