

Pay by Arrangement application

Account and Reference Details

Type of Account

(Rates, Debtors, Inspection &/or Food Admin fees)

Reference Number

(i.e. Customer Reference number, number commencing with HSB or FP etc)

Property Details

Unit No: Street No: Street Name:
Suburb: Post Code:

Applicant details

Title: Mr Mrs Ms Other

First Name: Family Name:

Company Name (if applicable):

Mailing Address:

Suburb: State: Post Code:

Email Address:

Daytime Telephone No. (Home/Work): Mobile No:

Payment Details

I undertake to pay \$ Per Week Fortnight Month

Starting Date / / To pay my debt (subject to interest accrued)

Declaration

• I declare that the information given is true and correct.

Applicant's Signature Date / /

Privacy notification

The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Protection Act 1998 and may be available to the public under various legislation. Refer also to the Privacy Statement on Council's website.

OFFICE USE ONLY

Receipt No	Date	Amount paid \$
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