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APPLICATION TO PAY ACCOUNT BY REGULAR PAYMENTS

Please tick New Application Change Existing
 Rates Water Rates & Water Sundry Debtors

PERSONAL DETAILS

Name: _____

Property Address: _____

Postal Address: _____

Home Phone: _____ Mobile: _____ Bus. Hours Ph: _____

Email : _____

Prop No.	Rates	Water	Sundry Debtor ID
Bank Ref No's			Inv No.
Total Arrangement Amount	\$	\$	\$
Payment Amounts	\$	\$	\$

End Payments <i>(Please circle)</i>	When arrangement paid in full		Ongoing	
Frequency <i>(Please circle)</i>	Weekly	Fortnightly	Monthly	Quarterly
START DATE <i>(please allow 7 days)</i>				

I will pay this arrangement by (please tick) - **BPay** **Centrepay** **AusPost** **In person OR:**

OTHER PAYMENT METHOD *(Please specify)*: _____

OR **I request to pay this arrangement by Direct Debit** *(please complete details below)*

Financial institutions branch: _____ BSB No. ____ _ Account No _____

Name on Bank Account: _____

Signed **Dated** **Accepted By**
Council Officer

For Council Policies **8.4 & 8.6** which relate to debt collection please see Council's website <http://council.lithgow.com/policies1>

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

By completion of this form you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly related to the function of Council. Information provided to Council may be used in conjunction with any of Council's business operations. We will take reasonable care not to disclose personal information. Exempt documents may come under the Government Information (Public Access) Act 2009.

Maintained by Dept:	Finance	Effective Date:	July 2019	Review Date:	July 2020
Version No:	4				

T:/Forms/Finance/Application to Pay Account by Regular Payments Version4


For office use only:


EITHER Complete the tables below OR attach a calculation spreadsheet

RATES CALCULATION				
Rates Balance	\$			
Est. Next Year	\$			
Est 2 nd Year	\$			
TOTAL	\$			
No of Payments				
Frequency	Wk	Fn	Mth	Qu
Repayment Amounts	\$			
Start Date				
End Date				

WATER CALCULATION				
Water Balance	\$			
Last 4 bills <i>(if paying over 12 months)</i>				
TOTAL	\$			
No of Payments				
Frequency	Wk	Fn	Mth	Qu
Repayment Amounts	\$			
Start Date				
End Date				

***To come to an arrangement for Sundry Debtors,
please speak to Accounts Receivable Officer or Finance Manager***

Customer Service 

Finance 

Arrangement letter sent Yes / No (please circle)

Notes:

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