

PAYMENT ARRANGEMENTS APPLICATION

I/we are currently unable to pay my/our outstanding rates in full and apply to make payments by instalments as follows:

Assessment Numbers:	<u>A</u>	<u>A</u>	<u>A</u>
Total Outstanding Balance:	<u>\$</u>	<u>\$</u>	<u>\$</u>
Regular Instalments of:	<u>\$</u>	<u>\$</u>	<u>\$</u>
Total Instalments of:	<u>\$</u>	per 7 days (or equivalent)	
Number of Payments:	_____		
First Payment Due:	_____	Payment Arrangement End Date*	_____

Conditions:

NO ARRANGEMENT WILL BE ENTERED INTO UNTIL THIS SIGNED FORM HAS BEEN RECEIVED AND APPROVED BY COUNCIL

* the maximum period for a payment arrangement will be 12 months. If there are still outstanding rates payable after 12 months, a review will need to be completed and a new payment arrangement approved

- I/we agree all current and future rate payments will be paid by their respective due dates. If the current or future rate payments fall into arrears, Council may terminate the agreement and/or demand payment of the total outstanding amount (including additional charges incurred).
- I/we agree to make the above mentioned payment instalments and repay the total outstanding rates amount by the end date as shown above, plus any legal costs incurred by Council during any debt recovery process.
- I/we are aware that the **balance of arrears will continue to accrue interest** at the prescribed percentage as specified in the Local Government Act 1999, Section 181 (17).
- Final notices may continue to be sent for outstanding balances. Please disregard these notices if you have made your payments in the agreed time frame.

Failure to honour the approved payment arrangement or pay all current and future rate payments may result in all outstanding balances being forwarded to debt management without further notice.

Ratepayers Name(s): _____

Postal Address: _____

Telephone Numbers: Home: _____ Work: _____ Mobile: _____

Email Address: _____

Signature(s) _____ Date: _____

FOR OFFICE USE ONLY

Payment Calculation

Outstanding Rates Amount (\$10 per week per \$500):	\$		Weekly equivalent:	\$	
Total Rates & Charges for previous 12 months:	\$		Weekly equivalent:	\$	
Number of Years Outstanding (add \$10 per week per year):			Weekly equivalent:	\$	
Number of Annual Reviews (add \$10 per week per review):			Weekly equivalent:	\$	
Minimum Payment Arrangement Required:			Weekly equivalent:	\$	
Total Rates Payable (Outstanding + Current Years Rates)	\$		Weeks to repay total rates payable*:		

* please note future annual rates may become payable during this period

Authorisation

Rates Officer:		Name:	Jacinta Lasscock	Date:	
Authorisation:		Name:		Date:	

