

Kyogle CouncilPayment Arrangement Application Form

AMENDMENT

NEW REQUEST

OUR DETAILS			
ame/s urname or Company/Business name			
as per account) roperty Address			
ostal Address			
elephone Number/s			
RRANGEMENT DETAILS			
ype of Arrangement	☐ RATES	☐ DEBTOR	
ssessment Number			
Outstanding Balance as at	\$		
Total Balance as at	\$		
Amount/s only required if Monthly Fortnightly or Weekly frequency chosen –	\$	\$	
n full assumes that the overdue amount will be paid in full on the late to commence)			
requency	☐ In full	☐ In full	
	☐ Monthly☐ Fortnightly	☐ Monthly☐ Fortnightly	
	Weekly	Weekly	
Pate to Commence	///	_ / /	
DDITIONAL DETAILS		1	
ACKNOWLEDGEMENT			
I/We understand and acknowledge that:-			
 Interest applies on all overdue balanc 	es in accordance with the Local	l Government Act 1993 regard	ess of any
payment arrangement. 2 This arrangement is subject to approve	al by Council.		
3 If unable to make a payment as per the 1611, prior to payment being due.		contacted in writing or by telep	hone on (02) 6
4 Any alteration to this payment arrange			to the next
payment due date, with an amended a 5 If a payment arrangement is broken a	nd no alternative payment arrar	ngement is entered into, Counc	cil may conside
action to recover the overdue balance The arrangement made does not include arrangement access.			cted after this
arrangement ceases.Council may conduct reviews of all are	rangements at its discretion.		
Signature		Date / /	
-	_		
Signature		Date /	