

Rates Payment Arrangement Application Form - General

Please complete the form in **BLOCK LETTERS** and return by:

- **Post:** PO Box 3 Orroroo SA 5431
- **Email:** council@orroroo.sa.gov.au
- **In Person:** 17 Second Street Orroroo SA 5431

Please note: Completion of this form does not automatically grant approval. You will receive written confirmation of your application along with a copy of this form. All payment arrangements with the District Council of Orroroo Carrieton will be monitored regularly.

Applicant Details

Name _____

Address _____

Email _____

Phone _____ Mobile _____

Property Details

Assessment Number A _____

Address _____

Registered Owner _____

Payment Arrangement

Please indicate the payment amount and frequency:

Amount \$ _____ Frequency Week Fortnight Month

Terms and Conditions (Please Read Carefully)

- 1) The payment arrangement terms and conditions must be adhered to at all times
- 2) All fines and interest will continue to be applied to all outstanding amount on a monthly basis
- 3) If two scheduled payments are not made, then the outstanding amount will be referred to Council's Debt Collectors
- 4) The amount contained in the agreement will be applied to outstanding fines and interest and then rates.

Rates Payment Arrangement Application Form - General

Agreement with Terms and Conditions

I _____ hereby apply to make regular payments as stated for the payment of rates fines and interest applied to the above mentioned property and hereby agree to the terms and conditions of the application.

Sign _____ Date ____/____/____

Application Assessment Office Use Only

Application Approved Yes / No Date of Agreement ____/____/____

Additional Conditions / Comments:

This agreement is provided in accordance with power contained in the Local Government Act, with the agreement being subject to the stated terms and conditions which must be adhered to. Failure to comply with the terms and conditions will result in Council taking action in accordance with the Debtor Management Policy as required.

Paul Simpson, Chief Executive Officer

Sign

____/____/____
Date