# **APPLICATION FOR RATES PAYMENT ARRANGEMENTS**



	sonal information will be used I Il not be given to any other per					
PROPERTY NUMBER						
PROPERTY ADDRESS						
A separate application is req arrangement.	uired for each property	y requiring a payment				
NAME/S ON ACCOUNT						
OWNER (1)						
DATE OF BIRTH (1)						
OWNER (2)						
DATE OF BIRTH (2)						
POSTAL ADDRESS						
PHONE						
EMAIL						
TOTAL AMOUNT OUTSTA	ANDING (\$)					
You will need to contact Cou		payout figure.				
Please note: It is the responsibility of the ratepayer to arrange payments.						
DATE OF FIRST PAYMENT						
PROPOSED PAYMENT AMOUNT (\$)						
THE AMOUNT MUST BE SUFFICIENT TO BRING THE ACCOUNT UP TO DATE BY THE END OF THE RATING PERIOD. *PLEASE READ THE BELOW IMPORTANT INFORMATION AND DECLARATION						
PAYMENT FREQUENCY	☐ Weekly	☐ Fortnightly	☐ Monthly			

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## APPLICATION FOR RATES PAYMENT **ARRANGEMENTS**



### **IMPORTANT INFORMATION**

Council will review the proposed payment arrangement and confirm in writing with you if the proposal is acceptable. You are encouraged to start making payments straight away as proposed.

Please note all payment arrangements must be cleared by the end of each rating period for which they apply, unless otherwise agreed by Council in writing. No verbal extensions will be granted.

\*The rating periods for each financial year are, 1 July to 31 December (arrangement payments will be accepted up to 28 February) and 1 January to 30 June (arrangement payments will be accepted up to 31 August).

Once the account is up to date you are encouraged to continue making regular payments to reduce the amount due at the time notices are issued.

#### **DECLARATION**

I/we understand that interest will be charged in accordance with Section 133 of the Local Government Regulation 2012, at the rate of 11.64% per annum, calculated and compounded daily until the arrears are paid in full.

I/we also understand that if the payment arrangement is not maintained (2 missed payments) then the payment arrangement may be cancelled, and legal recovery commenced without further notice.

Where recovery action is commenced, I understand that I will be liable for all costs associated with the undertaking of this action.

By signing this form, I/we acknowledge that I/we have read and agreed to the terms and conditions stated above.

SIGNATURE		DATE	
PROPERTY OWNER (1) NAME			
SIGNATURE		DATE	
PROPERTY OWNER (2) NAME			

Please Note: All owners must sign and agree to this payment arrangement, where there are more than two (2) owners another form must be completed, attached and signed.

Once completed please send form and any attachment to: records@isaac.qld.gov.au or Isaac Regional Council, PO Box 97, Moranbah QLD 4744 or deliver in person to your local Isaac Regional Council office.

### **DEPARTMENT USE ONLY**

PROCESSED BY	Signature	DATE	
	Print Name		

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