



Customer Service

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32 Salisbury St, Uralla NSW 2358

Application for Payment Arrangement

Contact Details	
First name:	Surname:
House Phone Number:	Mobile Number:
Property Address:	
Postal Address:	
Email Address:	
Account Type:	RATES <input type="checkbox"/> WATER <input type="checkbox"/> DEBTORS <input type="checkbox"/>
Rates Assessment/Debtor Number:	Balance Owing:

I hereby wish to make application to repay the above mentioned RATES Balance at \$_____ per _____

I hereby wish to make application to repay the above mentioned WATER Balance at \$_____ per _____

Minimum payment required by Council \$ _____

Payments will commence by _____ and will continue until the balance noted above has been repaid.

BPAY Payment Details

Billor Code: _____

Customer Reference for Rates: _____

Customer Reference for Water: _____

Name: _____

Signature: _____

Date: _____

- Failure to honour this agreement may result in legal action being commenced for the recovery of the debt without further notice.
- Each Payment must be made on or before the due date. All current accounts must be paid on or before the due date.
- Interest will continue to be charged on any outstanding amount. Please refer to page 4 of Debt Recovery Policy.
- No variance may be made to this schedule without the approval of the Debt Recovery Officer

Office Use Only

Date Received _____ Who _____ Date allocated and confirmation sent _____