

# VARIATION TO DIRECT DEBIT APPLICATION RATES

OFFICE USE ONLY		
Assessment:		
Direct Debit No:		
Date:		
SIGN	Access:	
	Authority:	
	Diary:	

Please complete one form per property

Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## PROPERTY DETAILS

Property Address: \_\_\_\_\_

Owned By: \_\_\_\_\_

## DIRECT DEBIT DETAILS

I request direct debit deductions from my/our bank account be:

**Stopped** – Please stop direct debits from \_\_\_\_\_ (date)

**Put on Hold** – Please stop direct debits from \_\_\_\_\_ and recommence on \_\_\_\_\_

**Change Bank Details:**

Account Name: \_\_\_\_\_

Bank Name: \_\_\_\_\_

BSB Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Change Amount/Frequency:**

Amount: \$ \_\_\_\_\_ Start Date: \_\_\_\_\_ (Date to commence on)

Frequency: **Yearly-**  Full amount (15 Feb)  Installments (30/09, 30/11, 28/02, 31/05)

(Tick one box) **Monthly-**  1<sup>st</sup> of the Month  15<sup>th</sup> of the Month

**Fortnightly-**  Thursday  Friday

**Weekly-**  Thursday  Friday

Other:

I understand:

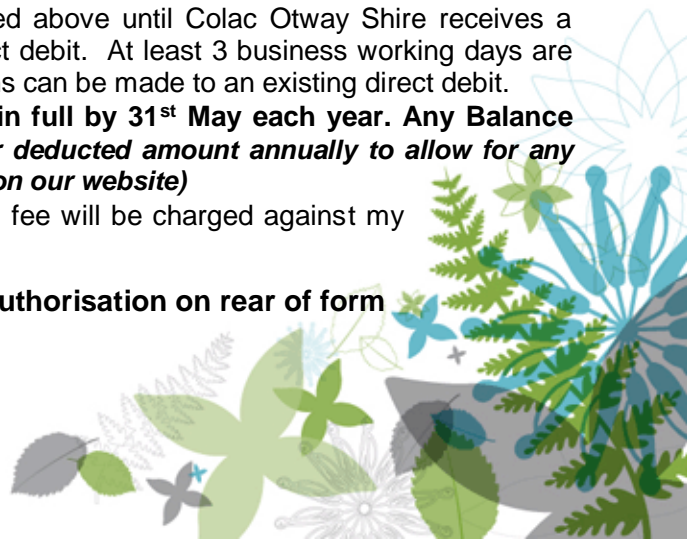
(please read and tick to show you have read and understood the information)

These direct debit amounts will be deducted as requested above until Colac Otway Shire receives a request in writing to change, put on hold, or stop my direct debit. At least 3 business working days are required before a direct debit can be set up or any variations can be made to an existing direct debit.

**Payment of Rates via direct debit are due to be paid in full by 31<sup>st</sup> May each year. Any Balance after that date will accrue interest (Please review your deducted amount annually to allow for any Rate increases, a Direct Debit Variation form is available on our website)**

If a direct debit is dishonoured a Bank and Administration fee will be charged against my rates (per dishonour).

Please sign Authorisation on rear of form



**AUTHORISATION**

By signing this agreement, I hereby authorise/agree:

1. The Colac Otway Shire to arrange for funds to be debited from my/our account at the financial institution identified above and as prescribed through the Bulk Electronic Clearing System (BECS).
2. This authorisation is in accordance with the Service Agreement between Colac Otway Shire and the Commonwealth Bank
3. The Colac Otway Shire to verify the details of the abovementioned account with my/our financial institution.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**DECLARATION:** *The Colac Otway Shire Council collects personal information to levy rates, issue permits and licences and provide a variety of community services. The information collected in this form is used only for the purposes contemplated by the form (primary purpose) and is not passed onto third parties. In some instances however, disclosure is required by law or is necessary for the protection of persons or property. Where this occurs, Council will take every reasonable step to ensure your privacy is protected in accordance with the Information Privacy Act 2000 (Vic). Should you need to change or access your personal details or require further information about Council's Privacy Policy contact our Privacy Officer on 5232 9400.*