



P.O. Box 194, Maryborough 3465  
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ARRANGEMENT FOR PAYMENT OF RATES

PROPERTY NUMBER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PERSON RESPONSIBLE  
FOR PAYMENT OF RATES: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

TOTAL AMOUNT CURRENTLY  
OUTSTANDING: \_\_\_\_\_ AS AT \_\_\_\_\_

I hereby agree to make the following commitment in order to clear the above property of all outstanding rates and charges.

I understand that interest will accrue on such amounts until fully paid.

I agree to pay the Central Goldfields Shire Council an amount not less than  
\$\_\_\_\_\_ per week/fortnight commencing on \_\_\_\_\_.

I understand that if at any time I am in default of this agreement the Shire may initiate legal proceedings, immediately and without notice, at my expense in order to recover the total amount of the debt outstanding plus interest accrued.

I require a Direct Debit Request Form - Yes/No

SIGNED: \_\_\_\_\_ WITNESS: \_\_\_\_\_

DATE: \_\_\_\_\_

**Privacy Notification**

The personal information requested on this form is being collected by Council to arrange payment of outstanding rates and charges. The information will be used solely by Council and placed on your property file. You may apply to Council for access to and/or amendment of this information.