Direct Debit Application



About this form

You may use this form to apply for a direct debit service to pay Council Rates.

This Direct Debit Request (DDR) Service Agreement is issued by the City of Sydney (user ID 087602)

How to complete this form

- 1: Ensure that all fields have been filled out correctly.
- 2: Please note that fields on this form marked with an * are mandatory and must be completed before submitting the application.
- 3: Once completed you can submit this form by email, mail or in person. Please refer to the Lodgement details section for further information.

| Part 1: Applicant Details | | | | | |
|--|--|--|--|--|--|
| Who is making this application: Owner Other (please specify): | | | | | |
| Given Name/s * Family Name * | | | | | |
| Rates Assessment Number | | | | | |
| | | | | | |
| Property address* | | | | | |
| | | | | | |
| Applicant Mailing Address (if different from above)* | | | | | |
| | | | | | |
| Please note: Before this application can be lodged at least one of the modes of contact below must be supplied. | | | | | |
| Home Number Business Number Mobile Number | | | | | |
| | | | | | |
| Email Address | | | | | |
| | | | | | |
| Part 2: Direct Debit Conditions | | | | | |
| By submitting this form I understand that: | | | | | |
| a) Any dishonoured payments will incur a processing fee according to the City of Sydney's Statement of Revenue Policy - fees and charges. | | | | | |
| b) The amount of the Direct Debit may differ from the amount shown on the Rates Notice where alternative payments and adjustments occur. | | | | | |
| c) I will advise the City of Sydney if my details change, and the City of Sydney shall not be held responsible for my failure to do so. | | | | | |
| d) Cancellation, adjustments or any kind of variance to the Direct Debit authority must be undertaken in writing and received by Council at least 7 working days before the next required payment. | | | | | |
| e) The City of Sydney reserves the right to cancel drawing arrangements if one drawing is dishonoured. An alternate payment method will then be required. | | | | | |
| f) Direct Debit is only for cheque and savings accounts, not for credit cards. | | | | | |
| g) Where you have opted for City of Sydney to draw money from your account, it is your responsibility to: | | | | | |
| 1 Ensure your nominated account can accept direct debit: | | | | | |

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2. Ensure there are sufficient funds available in the nominated account to meet each drawing on the date;

3. Advise us if the nominated account is transferred or closed, or the account details change;

Part 2: Direct Debit Conditions Continued... 4. Arrange a suitable payment method if the City of Sydney Council cancels the drawing arrangements; 5. Ensure all account holders on the nominated financial institution account sign the Direct Debit Application form. City of Sydney Commitment to you: 1) The City of Sydney will give you at least 14 days notice in writing if there are changes to the terms of the arrangements. 2) The City of Sydney will keep information relating to your nominated financial institution account confidential, except for the purposes of conducting direct debits with your financial institution. 3) For requests that the City of Sydney draw money from your account, where the due date is not a business day, the City of Sydney will draw from your nominated financial institution account on the nearest business day. Part 3: Account to be Debited I/We (please print name/s) * I/We wish to register for direct debits from my/our account conducted with (name of Financial Institution) * Name of Account Holder to be debited (your name/company name as on bank statement) * BSB Number (6 Digits only) * Account Number (Cheque and Savings only, not your card number - maximum of 9 digits) * 1. Account Signature * 2. Account Signature Please note: If debiting from a joint bank account, all signatures are required. Part 4: Payment Type Please be advised that there are several options for paying your rates, however overdue rates can not be paid by direct debit but can be paid in person at a Customer Service Centre. Please also be aware that interest on overdue accounts accrues in accordance with the Minister approved rate. Please tick the appropriate box below for future rate payments; Annual (yearly) payment in full (due 31 August) Quarterly Installments (due 31 August, 30 November, 28 February, 31 May) Part 5: Applicant Declaration

I declare that the information I have provided is true and correct in every detail and that by signing this form I agree to the Direct Debit Conditions as listed above.

| Applicant Name * | Applicant Signature * | Date * |
|------------------|-----------------------|--------|
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| Part 6: Priv | acy & I | Personal Information Prot | ection Notice | | | |
|--|---|--|---|--|--|--|
| Purpose of collection:This information is being collected for the purpose of providing Direct Debit services for Rating purposes within the City of Sydney Council area. | | | | | | |
| Intended recipients: City of Sydney employees. Any approved contractors required to provide this service. | | | provide this service. | | | |
| Supply: | | | n is voluntary. If you are unwilling to ovide access to City of Sydney servi | provide this information, the City of ces. | | |
| Access/Correction: | | Please contact Customer Service on 02 9265 9333 or at council@cityofsydney.nsw.gov.au to access or correct your personal information. | | | | |
| Storage: | | | he City of Sydney, located at 456 Ke d the City of Sydney will store it sect | | | |
| Other uses: | The City of Sydney will use your personal information for the purpose for may use it as is necessary for the exercise of other functions. | | pose for which it was collected and | | | |
| For further details on how the City of Sydney manages personal information, please refer to our Privacy Management Plan cityofsydney.nsw.gov.au/policies/privacy-management-plan . | | | | | | |
| Part 7: Lod | gemen | t Details | _ | | | |
| You can lodge | the com | pleted application by: | | | | |
| EMAIL: | counc | cil@cityofsydney.nsw.gov.au | | | | |
| MAIL: | GPO E | f Sydney Box 1591 y NSW 2001 | | | | |
| IN PERSON: | See ou | Hall House - Level 2, 456 Kent Street, Sydney ur website for details of all customer service centres and opening hours: sydney.nsw.gov.au/customer-service-centres | | | | |
| WHAT NOW: | • | your application is received a Council Officer will contact you within 7 working days if further ation is required. | | | | |
| For further info | rmation | regarding your application plea | ase contact us by visiting <u>cityofsyd</u> | ney.nsw.gov.au/contact-us | | |
| Office Use (| Only | | | | | |
| Receiving Office | cer | | Date Received | | | |
| Direct Debit Authorised (tick appropriate box) Appropriate Debit Authorised (tick appropriate box) | | Approval Date | | | | |
| No Yes | | | | | | |