

Payment Arrangement Form

Completion and payment of this form does not indicate acceptance of an adhoc payment arrangement with Council. Proposed arrangements that are not acceptable are not eligible for a refund.

Applicant Details

Applicant Name*					
Postal Address*					
Suburb*		State*		_ Post Code*	
Phone No*			Fax No		
Email					
Property Details					
Property Address*					
Suburb*		State*		_ Post Code*	
Assessment #					
Proposed Payment F	Plan*:				
\$		Per:	Week	Fortnight	Month Month
Commencing					
Application Payment	t Details (check on	e)*			
Cash		Cheque			
Credit Card Note: VISA and II All cheques and I	Mastercard payment money orders must	Money (ts only. be made payab		ratha.	
Credit Card Details					
Card Holder Name					
Type of Card	Visa	Ma	astercard		
Card Number	_				
Expiry Date		CCV no		_	
Signature				Date	
Amount to be process	\$50.0	10			

Upon completion of this form, please submit by email to enquiries@karratha.wa.gov.au or regular mail to: City of Karratha, PO Box 219, Karratha WA 6714

* These fields are mandatory and must be completed in full for an application to be considered. Adhoc payment arrangements are only valid until 31 June of the current financial year. Any alteration to an existing payment arrangement must be proposed with this application form and the standard fee must be paid.

Daily penalty interest of 11% per annum may continue to be applied to your outstanding balance. It is the responsibility of the ratepayer to ensure that correct payments are made on the agreed date, reminder notices will not be issued. Failure to adhere to agreed arrangements may result Council withdrawing from the arrangement and legal action being taken to ensure recovery

Cancellation Policy - Refunds are only applicable where no work has commenced on your application.