



### AUTOMATIC DIRECT DEBIT

I/We \_\_\_\_\_  
(Surname or Company / Business Name) (Given Name or ACN)

Of \_\_\_\_\_  
(Address)

\_\_\_\_\_ (State) \_\_\_\_\_ (Postcode)

Property Assessment Number \_\_\_\_\_

Property Address (if different to above) \_\_\_\_\_

### DETAILS OF ACCOUNT TO BE DEBITED

Account in the Name of: \_\_\_\_\_

Financial Institution's BSB: \_\_\_\_\_ - \_\_\_\_\_ Account Number : \_\_\_\_\_

Name of Financial Institution: \_\_\_\_\_

### RATES PAYMENT

Payment amount: \$ \_\_\_\_\_

Payment frequency:  Weekly  Fortnightly  Monthly

Date payments will commence: \_\_\_\_\_ Day of Week: M T W T F

Quarterly The amount owing for the quarter will be deducted on the quarterly instalment due date as per the Rates Notice

Yearly The amount owing for the financial year will be deducted on the 1<sup>st</sup> instalment due date as per the Rates Notice

### WATER PAYMENT

Payment amount: \$ \_\_\_\_\_

Payment frequency:  Weekly  Fortnightly  Monthly

Date payments will commence: \_\_\_\_\_ Day of Week: M T W T F

Quarterly The amount owing for the quarter will be deducted on the quarterly instalment due date as per the Rates Notice

### AUTHORISATION

I/We have read the "Customer Service Agreement" that is attached or separate and acknowledge and agree with its terms and conditions. I/We request this arrangement to remain in force in accordance with details set out in the Schedule described above and in compliance with the "Customer Service Agreement"

I acknowledge that the above information is correct, that all owners are in agreeance and I have the right to sign on their behalf.

Customer Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DIRECT DEBIT REQUEST**  
**CUSTOMER SERVICE AGREEMENT**

**We Cootamundra-Gundagai Regional Council note our commitment to you as the following:-**

- We will advise you by notice, statement or invoice of the drawings.
- Where the due date falls on a non-business day, we will draw the amount on the next business day.
- We will provide written notice of any proposed changes to your drawing arrangement, providing no less than 14 days notice.
- We reserve the right to cancel the drawing arrangement if drawings are continually returned unpaid by your nominated Financial Institution. Where drawings are returned unpaid we will arrange with you an alternate payment method. A fee may apply for drawings that are returned unpaid.
- We will keep all information provided by you and details of your nominated account at the Financial Institution, private and confidential.
- We will investigate and deal promptly with any queries, claims or complaints regarding debits, providing a response within 20 business days.

**You (customer) note your commitment to us as the following:-**

- It is your responsibility to check with your Financial Institution prior to completing the Direct Debit Request, that direct debiting is available on that account.
- It is your responsibility to ensure that the authorisation on the Direct Debit Request is identical to the account signing instruction held by the Financial Institution of the nominated account.
- It is your responsibility to ensure at all times, that sufficient funds are available in the nominated account to meet a drawing on the due date for payment.
- It is your responsibility to advise us if the account nominated by you, to receive the drawings is altered, transferred or closed.
- It is your responsibility to arrange with us a suitable alternate payment method, if the drawing arrangements are stopped, either by you or the nominated Financial Institution.
- It is your responsibility to meet any charges resulting from the use of the Direct Debit System. This may include fees charged to us as a result of returned drawings.

You may request to defer or alter the agreed drawing schedule, by giving written notice to us. Such notice should be received by us at least 10 business days prior to the due date.

You may stop your individual debit by giving written notice to us. Such notice should be received by us at least 10 business days prior to the due date.

You may cancel the Direct Debit arrangement at any time by giving written notice to us. Such notice should be received by us at least 10 business days prior to the due date. Your nominated Financial Institution is unable to cancel your Direct Debit Arrangement.

All transaction disputes, queries, and claims should be raised directly with us. We will provide a verbal or written response within 20 business days from the date of the notice. If the claim/dispute is successful, we will reimburse you by way of cheque or electronic credit to your nominated account.

Please return this form to the Cootamundra-Gundagai Regional Council office, by one of the following means:

- In Person: Cootamundra or Gundagai Offices
- By post: PO Box 420, Cootamundra NSW 2590
- By fax: 02 6940 2127
- By email: [mail@cgrc.nsw.gov.au](mailto:mail@cgrc.nsw.gov.au)