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SPECIAL DEBT REPAYMENT APPLICATION FORM

INDIVIDUAL DETAILS (enter as applicable)

Surname:	First Name(s):
Property Address:	
Town:	Postcode:
Postal Address <small>(if different to above)</small> :	
Town:	Postcode:
Phone:	Mobile:
Email:	

PAYMENT PROPOSAL

I hereby request an extension of time to pay my Rates Account, and other arrears for the abovementioned property/s:

Total Amount Due: _____ (Includes Penalty Amount: _____)

I wish to offer _____ payments of \$ _____ weekly/fortnightly/monthly,
 commencing _____ (date) to enable the debt to be cleared by _____ (date)
 (see attachment if necessary)

DECLARATION

I/We understand: If my/our application is received **prior to the due date of the payment, a penalty amount** as approved by Council (currently 10%) **will be applied to any balance outstanding after the agreed date.**

If my/our application is received **after the due date of payment** then the penalty amount is to be included in the repayment arrangement.

Should I fail to comply with the arrangements, Council may commence legal proceedings to recover the debt without further notification to me

Signature:	Signature:
Name:	Name:
Date:	Date:

Privacy Statement

The personal information on this form is required by Council for administrative purposes. We will only use your personal information for this and related purposes. If this information is not provided, we may not be able to deal with this matter. You may access and/or amend or personal information at any time. How we use this information is explained in our Privacy Policy, which is available at www.circularhead.tas.gov.au or at the Council office.

OFFICE USE ONLY

Received:	Date:
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PID:

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- Proposal Accepted
 Processed in Council First