DISTRICT COUNCIL OF Streaky Bay
29 Alfred Terrace, Streaky Bay SA 5680
T: (08) 8626 1001 **E:** dcstreaky@streakybay.sa.gov.au

Payment Arrangement Application

FINANCIAL MANAGEMENT
DCSB 07 Form 78

Applicant Details

Name _____

Address _____

Email_____ Phone _____

Account or Property Details

Assessment No/ Debtor No_____

Property Address _____

Payment Arrangement Details

New arrangement or Amendment of current arrangement

RATES $ _____ Commencing _____/_____/_____ Weekly / Fortnightly / Monthly

DEBTOR $ _____ Commencing _____/_____/_____ Weekly / Fortnightly / Monthly

I understand and acknowledge that:

> *Interest applies on all overdue rate balances in accordance with the Local Government Act 1999;*
> *If unable to make a payment please contact Council ASAP;*
> *If a payment arrangement is broken and no alternative arrangement is entered into, Council may consider action to recover the overdue balance at any time.*

Name _____ Date _____

Signature _____

Payment Options

Bank Transfer
BSB: 015-436
ACC: 7062 30051
Reference: Assessment No or Debtor No.

BPAY (Rates ONLY)
Biller Code: 180687
Reference: Assessment Number

Please return this form to the District Council of Streaky Bay by mail, fax, e-mail or in person.

In Person
District Council of Streaky Bay
29 Alfred Tce
Streaky Bay SA 5680
Mon – Fri 9am – 5pm

Mail
District Council of Streaky Bay
PO Box 179
Streaky Bay SA 5680

Fax/ Email
(08) 8626 1196
dcstreaky@streakybay.sa.gov.au