

Application Form

PERSONAL DETAILS

Assessment:
Number

Name/s:

Property address:

Contact: Home : _____ Mobile: _____ Email _____

PLEASE TICK ONE OF THE FOLLOWING AND READ THE REVERSE SIDE OF THIS FORM:

New Direct Debit arrangement () **Change** to existing Direct Debit arrangement ()

Cancel Direct Debit arrangement () Cancellation Date ____/____/____

BANK DETAILS

Financial
Institution name:

BSB:

Account number:

Account holder
name:

DRAWING ARRANGEMENTS – PLEASE READ

We only draw money out of your account in accordance with the terms of your Direct Debit Request. If any drawings fall due on a public holiday, it will be debited from your account the next business day following the scheduled drawing date. We will give you at least 14 days notice in writing when changes to the initial terms of the arrangement are made. Please see below for all dates and days scheduled for Direct Debit payments.

- **Annual instalments** - First instalment due dates as per the Rates Notice
- **Quarterly instalments** - Instalment due dates as per the Rates Notice

PAYMENT DETAILS

Please circle one of the following debit options:

Annually
Quarterly

Payment date:

Please indicate when you would like to start your Direct Debit arrangement in accordance with the 'Drawing Arrangements' information above

First Payment Date: ____/____/____ (DD/MM/YY)

Please allow at least 7 clear business days from time of post to this date

By signing this document, I/We authorise the City of Marion ABN 37 372 162 294 (Direct Debit User ID 106766) to arrange for funds to be debited from my/our nominated account at the financial institution shown above according to the schedule specified above, through the Direct Debit System for the payment of council rates.

Signed:

Print name:

Signed:

Print name:

If signing on behalf of a company you must be authorised to sign on behalf of the company and authority to operate the company's bank account Company Position:

Delivery Address:
PO Box 21
PARK HOLME SA 5043

No stamp required
if posted in Australia

Rates Department
City of Marion
Reply Paid 86133
PARK HOLME SA 5043

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SERVICE AGREEMENT

OUR COMMITMENT TO YOU

This document outlines our service commitment to you, in respect of the arrangements made between the Corporation of the City of Marion, trading as City of Marion (ABN: 37 372 162 294 User ID: 106766), and you. It sets out your rights, our commitment to you and your responsibilities to us, together with where you should go for assistance. We agree to be bound by this agreement when we receive your request complete with the details we require as outlined. We will keep all information that you have provided, private and confidential, only to be disclosed at your request.

ENQUIRIES

For any enquiries relating to this form, please contact the City of Marion Rates Department on (08) 8375 6600 or email council@marion.sa.gov.au, quoting your assessment number and property address.

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YOUR COMMITMENT TO US

It is your responsibility to ensure that:

- your nominated account can accept Direct Debits under the Direct Debit System
- you have sufficient cleared funds in the nominated account on drawing dates
- you advise us if the nominated account is changed in any way, transferred or closed

If your drawing is returned unpaid by your financial institution, notice will be sent requesting payment by alternative means. Any fees payable by us in respect of the above will be added to your Rates account. **Dishonour Fees do apply and are payable by the ratepayer.** For subsequent dishonours the Direct Debit service will be cancelled.

CHANGES TO THE ARRANGEMENT

If you wish to alter, delay or cancel these details, please contact us **in writing** at least seven working days prior to your next Direct Debit extract date.

MOVING HOUSE?

You will need to cancel your Direct Debit. This will apply even if you are moving to a new property within the City of Marion. The Direct Debit will only relate to the property address for which you have supplied the details and will not move with you.