COUNCIL PAYMENT ARRANGEMENT



Please complete this form and return to the council office:
29 Holland St (PO Box 321) Kingston SE SA 5275 EMAIL: rates@kingstondc.sa.gov.au

PLEASE NOTE: Completion of this form does not automatically grant approval. You will receive written confirmation of your application. All payment arrangements made with the Kingston District Council will be monitored regularly.

APPLICANT DETAILS					
Assessment Number: A	Sundry Debtor N	umber:	D	Expiation No:	K
Name:					
Property Address					
Postal Address:					
Phone:					
Email:					
I agree to my email being added	to Council's email c	database	? 🗆 '	Yes □ No	
PLEASE TICK THE APPROPRIATE A	ARRANGEMENT				
Regular Payments of \$		per	week	fortnight	month
Date of first payment					
Quarterly instalment notices/month make an amendment to this arrange taken for properties/debtors with a placement of your account into the will be added to your account.	ement at any time ple n payment arrangeme	ase conta ent, failure	ct the Cou e to keep	ncil office. While le an arrangement n	egal action is not nay result in the
Signature of Applicant:		1	Date:		
Office Use Only		., _			
Date Received: Action Taken:	Approved		No □		
Date Action Taken:		Yes □	No □	Date Advised:	

Letter Reference (if applicable): ...