

### REQUEST AND AUTHORITY TO AMEND CURRENT DIRECT DEBIT

Property Address:

Ratepayer Name:

Assessment:

Email:

Phone:

I wish to receive all future direct debit correspondence and rates notices electronically to the above email address

### CHANGE OF BANK ACCOUNT DETAILS

**BANK ACCOUNT DETAILS**

Name of bank account holder:

BSB number:

Account number:

### CHANGE OF CREDIT CARD DETAILS

**CREDIT CARD DETAILS**

Direct debiting to credit cards does not form part of procedures governed by the Bulk Electronic Clearing System. Please refer to procedures detailed in your cardholder terms and conditions provided by your Financial Institution.

If credit card is your preferred method of payment, please provide the best telephone contact for you during business hours above. The Revenue Team will contact you to verbally obtain this information prior to the commencement date of your direct debit.

### CHANGE FREQUENCY OF DEBITS

Please note:

- Quarterly and Yearly debits will be for the amount due as shown on your rate or instalment notice.
- Monthly debits are deducted from your bank account or credit card on the last working day of the month.
- Weekly and Fortnightly debits are deducted from your bank account or credit card on a FRIDAY only.

Start NEW debit on

Amount: \$

Then at the following intervals

Yearly

Quarterly

Monthly

Fortnightly

Weekly

### TEMPORARILY SUSPEND DEBITS

Please STOP my direct debit on:

Please RESUME my direct debit on:

### ACKNOWLEDGEMENT

By signing and/or providing us with a valid instruction to amend your current direct debit request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Maitland City Council as set out in your Direct Debit Request Service Agreement.

Signature:

Date:

*If signing for a company, sign and print full name and capacity for signing, eg Director*

**Privacy Statement:** Maitland City Council complies with the Privacy Code of Practice for Local Government in dealing with all personal information that is required to be supplied when an applicant completes this application. However, some of the personal information which is set out in this form will become part of the public record which Council is required to keep pursuant to the Local Government and Environmental Planning and Assessment Acts. This information may be divulged to others in accordance with the provisions of those Acts. Furthermore, Council may be required to divulge some personal information pursuant to the Freedom of Information Act.

### PLEASE RETURN THIS FORM TO:

Maitland City Council: via email to [info@maitland.nsw.gov.au](mailto:info@maitland.nsw.gov.au) or via post to PO Box 220, Maitland 2320