Shire of Wyndham
East Kimberley

DOCUMENT TYPE	Form or Template
TITLE	**Rates Payment Arrangement**
NUMBER:	FMT-2027

PURPOSE

Complete this form to apply for a rates payment arrangement.

DETAILS			
Assessment Number:		**Arrangement Date:**	
Property Address:			
Contact Phone:			
Owners:			
Current Owing:	**$**		
Payment Arrangement Fee:	**$**	**Payment Frequency:**	
Payment Amount:	**$**	**First Payment Date:**	

AGREEMENT

I/ We _____ agree to this payment plan. I agree to pay a **$72.50** establishment fee. I understand that interest is accruing daily at 11% per annum. I agree to pay all outstanding amounts including accrued interest by 30 June 2027. I understand that if I default on the payment arrangement, this payment arrangement will be immediately terminated and that legal action will commence.

No reminder noticed or follow up communication will take place.

Signed: _____ Signed: _____

PAYMENT OPTIONS			
Direct Payment		**BPAY**	
BSB	066-000	**Biller Code**	102376
Account	17335340	**Customer Ref**	
Reference			

OFFICE USE ONLY			
Approving Officer Director Corporate Services			
Signature		**Date**	
Fee Levied	☐	**JNL No**	
Memo On Property	☐	**Date**	

DOCUMENT AND VERSION CONTROL

Responsible Directorate		Corporate Services
Related Documents		*Nil*
Version	**Date Issued**	**Date of Next Review**
1.0	18/08/2026 - LMA077	August 2029