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| ShireofDardanup BW Black | | | | | | | | | | | | **APPLICATION FORM**  **DIRECT DEBIT**  **FORM 24**  **(White)** | | | | | | | | | | | | | Date stamp | | | | |
| **Part 1 Type of Account** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | | Rates | |  |  | | | Debtor | | | | |  | | | | |  | | Reference No (if known) | | | | | |  | |  |
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| **Part 2 Applicant details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Address | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Email | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Telephone | | | | | | | | | | | | | | | | | |  | Mobile | | | | | | | | |  |
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| **Part 3 Property Details (For Rate Accounts Only)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Street No | | | | | | | | | | | | | | |  | Street Name | | | | | | | | | | | |  |
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|  | Suburb | | | | | | | | | | | | | | | | | | | | | | | | |  | Post Code | |  |
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|  | **Once rates are paid?** | | | | | | |  | | Continue with direct debit to get account in credit | | | | | | | | | | | |  | Cancel direct debit | | | |  |  | |  |
|  |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  |
| **Part 4 Bank Account Details - PLEASE NOTE: THIS IS NOT AVAILABLE FOR CREDIT CARDS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Bank Code (BSB) | | | | | | | | | | | | | | | | | |  | Account Number | | | | | | | | |  |
|  |  | | |  | | |  | | | |  | | | |  | | |  |  |  | | | | | | | | |  |
|  | Account Holder Name | | | | | | | | | | | | | | | | | |  | Name & Branch of Financial Institution | | | | | | | | |  |
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| **Part 5 Deduction Details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  | | Weekly | | | | | | | | | | | | | | | |  | Fortnightly | | | |  | | |  | |  |
|  | Amount per Deduction | | | | | | | | | | | | | | | | | | Commencement Date | | | | | | | | | |  |
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| **Part 6 Declaration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | I / We authorise and request that the Shire of Dardanup (User ID No. 227827) debit my account at the financial institution shown above, through the Direct Debit system.  I / We also acknowledge that the ‘Direct Debit Request Service Agreement’ on the reverse of this form, has been read and understood. | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | Name(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Signature | | | | | | | | | | | | | | | | | | | | | | | | | | Date | |  |
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|  | Signature | | | | | | | | | | | | | | | | | | | | | | | | | | Date | |  |
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| **Part 7 OFFICE USE ONLY Manager Authorisation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Name | | | | | | | | | | | | | | | | | | | | | | | |  | Date | |  |
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|  | | Signature | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **Part 8 OFFICE USE ONLY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Assess/Debtor Number | | | | | | | | | | | |  | | | | | | | | | Entered By | | | |  | Date | |  |
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| **DIRECT DEBIT REQUEST – SERVICE AGREEMENT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OUR COMMITMENT TO YOU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This document outlines our service commitment to you, in respect of the Direct Debit Request arrangements between the Shire of Dardanup User ID 227827 and you. It sets out your rights, our commitment to you and your responsibilities to us and where you go for assistance.  In terms of the Direct Debit Request arrangement made between the Shire of Dardanup and signed by you, we undertake to periodically debit your nominated account for the agreed amount for rates. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ENQUIRIES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| In the first instance direct all of your enquiries directly to the Shire of Dardanup, rather than your financial institution. Any enquiries (eg. Deferring the drawing, altering the schedule, stopping an individual debit, suspending or cancelling the arrangement) must be made at least three (3) working days prior to the next drawing date by providing your alteration in writing to the Shire of Dardanup. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **THE SHIRE OF DARDANUP’S RESPONSIBILITIES TO YOU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| All personal information held by the Shire will be kept confidential except for the information we provide to our financial institution to initiate the drawing from your nominated account.  The first drawing under this Direct Debit arrangement will occur on your nominated deduction day. Deductions will be made from your nominated account weekly/fortnightly on Thursday (schedule of deduction dates are attached) until the debt is fully paid, unless you have an agreement to continue.  The Shire of Dardanup will give at least 30 days’ notice of any variations to your existing payment arrangement.  If the normal scheduled drawing date falls on a public holiday the Shire will draw from your account on the next available working day  An administration fee of $45.00 per annum will be charged to your rates account, plus interest charges of 11% per annum calculated daily on outstanding overdue balances.  The Shire of Dardanup may pass on to you any bank fees it may incur that relate to a dishonoured Direct Debit drawing. If your drawing is dishonoured, we will contact you to discuss alternate payment arrangements. If multiple dishonours occur within a financial year, the Shire of Dardanup may cancel the Direct Debit arrangement.  Applicable fees may be adjusted annually as part of the Council’s Fees & Charges Schedule that form part of its Annual Budget. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **YOUR RESPONSIBILITIES TO THE SHIRE OF DARDANUP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Check with your financial institution to ensure that your nominated account can accept Direct Debits  Ensure that on the drawing date there are sufficient funds available in your nominated account. Advise the Shire of Dardanup accordingly should your account be transferred or closed.  Provide information of any alterations to your existing Direct Debit payment arrangement to the Shire of Dardanup in writing at least three (3) working days prior to the drawing date. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DISPUTES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If you believe that a drawing has been initiated or carried out incorrectly, we encourage you in the first instance to take the matter up directly with the Shire of Dardanup by calling 08 9724 0371. The dispute must then be followed up in writing.  On receipt of advice of any dispute we will address the issue and advise you of an outcome within three working days. If you do not receive a satisfactory result from the Shire of Dardanup to your dispute contact your financial institution who will respond to you with an answer to your claim  Within 7 business days (for claims lodged within 12 months of the disputed drawing date)  Within 30 business days (for claims lodged more than 12 months after the disputed drawing date)  You will receive a refund of the drawn amount if we cannot substantiate a reason for the drawing. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **RETURN FORM TO:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shire of Dardanup  Rates Department  PO Box 7016  EATON WA 6232  rates@dardanup.wa.gov.au | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

