



PAYMENT PLAN OWNER

ACACC03-TMP-004 Date Approved: 05 July 2017

| APPLICANT: | | ASSESS NO: | | | |
|---------------------------------|-----------|--|-------------------------|-------------|---|
| ADDRESS: | | | DATE: | | |
| TELEPHONE: | | Mobile: | | Home: | |
| (A Contact Number is mandatory) | | | | | |
| Email address: | | | | | |
| | | | | | Г |
| PROPERTY ADDRESS: | | | | | USER ID: |
| payments by instalments as | follows: | | · | n full, I v | vish to formally apply to make |
| Balance Outstanding Fort | | nightly Instalment | Due Date | | Remaining Balance |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| due date. Please note that a | in intere | est penalty (calculated the above arrangem | daily) applies to all o | verdue a | nd make all payments by their amounts. Perty being restricted or legal |
| SIGNATURE | | FUL | FULL NAME (Print) | | DATE |