Customer Request for Reallocation/ Transfer of Payment



To be completed by an owner/ authorised person only. Please return completed form to Council.

Date:/	
Ratepayer Name:	
Assessment Number:	
Property Address:	
Phone #:	
Email Address:	
	<u>'</u>
Reallocation of Payment – Pay	ment has been made to the wrong account:
I	, owner of the above address, would like to request the
payment of \$ ma	ade on the/, to be transferred from rates/ water
(please circle), to my rates/ water	r (please circle) account for: Assessment Number:
Transfer of Payment – Transfer	rring Water Credit to Rates account:
I	, owner of the above address, would like to request the
amount of \$ to b	be transferred from water account to rates account.
NOTE:	
The finance team will pro	cess your request within 3 days of receiving this request
Once the the transfer has	s been processed, you will receive a confirmation letter
Print Namo:	Signature: