



To the General Manager, Nambucca Valley Council
**APPLICATION TO ESTABLISH CREDIT ACCOUNT
FOR CONVEYANCING PURPOSES**

PO Box 177 MACKSVILLE NSW 2447
Administration Building: 44 Princess Street, Macksville NSW 2447
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Phone: (02) 6568 0215
ABN: 71 323 535 981

Application is hereby made to open a monthly account with Nambucca Shire Council.

- 1 (a) I am fully aware the Council's trading terms are STRICTLY 30 DAYS net and agree to abide by such terms of settlement.
(b) I am aware a non-refundable annual administration fee, (\$44 – 2020/2021), will be charged for conducting a monthly Sundry Debtor account. This annual charge will be reviewed each financial year. *(This amount is pro-rata'ed depending on when the account is opened).*
- 2 I am also aware of and agree to pay interest equivalent to interest on overdue rates in accordance with Council's revenue policy which may be added to my account if in arrears as a result of my not having paid such account on the due date or within the prescribed terms of trading. I am also aware that the account will be suspended until such time as the outstanding amount is paid in full.
- 3 I also agree to pay all legal expenses, charges and commissions incurred as a result of any unpaid account having been collected through the efforts of Council legal collection process together with all service charges accruing for the period the account remains unpaid.
- 4 I give permission for the Credit Referee listed below to give Council written or verbal reference on may payment history with their business.

Date of Application: _____

Name of Applicant: _____

Company/Trading Name: _____

ABN: _____ GST Registered: Yes/No

Address: _____

Postal Address: _____

Phone Number: _____

Fax Number: _____

Signature of Applicant: _____

Local Business Credit References:

1 Name: _____

Address: _____

Phone: Fax:.....

This information is being voluntarily collected to process your application. The information will be kept by Council and will be disposed of in accordance with the Local Government Disposal Authority. You are entitled to review your personal information at any time by contacting this Council.

OFFICE USE ONLY

Reference checked: _____

Application Approved: YES/NO Date Debtor Account/Register Opened: / /

Debtor Number: _____ .42 Register No: 83. _____ . _____ .