

## **Direct Debit Cancellation**

City Administrative Centre Bridge Road, Nowra, NSW, Australia, 2541

Address all correspondence to: The General Manager, PO Box 42, Nowra, NSW, Australia, 2541

council@shoalhaven.nsw.gov.au I www.shoalhaven.nsw.gov.au I Phone: (02) 4429 3111 I Fax: (02) 4422 1816

1 Applicant	2 Cancellation Details	
Given name(s):  Surname:  Business or Company Name:  Postal Address:	Property address/es to which the Direct Debit cancellation relates:	
Suburb: Postcode:  Phone: Mobile:  Email:	(please tick the accounts you want the direct debit to apply to)  □ Rates	
If this address differs from Council records, do you want	3 Additional Information	
your mailing details updated?	Additional information (if any) eg. Power of Attorney:	

Privacy Notification: The information requested on this form is being collected in order that your account may be debited in favour of Shoalhaven City Council. The information will be used by staff and the nominated institution for the purpose mentioned or a directly related purpose. This information is provided on a voluntary basis and you may apply to Council for access or amendment of the information at any time.

## **OFFICE USE ONLY**

	Request - Direct Debit Cancellation		Accounts & Customer Service Officer
Form Number: 777	Version Number 2	Issue Date:04/2016	Next Review date: 02/2018