



# Authority to Transfer Monies

10 Graham Place, CASINO  
25 Woodburn Street, EVANS HEAD  
Locked Bag 10, CASINO, NSW, 2470  
Phone: 02 6660 0300 Fax: 02 6660 1300 [council@richmondvalley.nsw.gov.au](mailto:council@richmondvalley.nsw.gov.au)

## Your Details

Property ID / Debtor Number: .....

Full Name as per notice: .....

Property Address: .....

Postal Address: .....

.....

Telephone: ..... Mobile:.....

Email: .....

## Details of Transfer

I hereby request Council to transfer funds from nominated account as listed above:

Rates	To	Water / Sewer or Debtor	Property / Account Number:	\$
Rates	To	Rates	Property / Account Number:	\$
Water / Sewer	To	Rates or Debtor	Property / Account Number:	\$
Water / Sewer	To	Water / Sewer	Property / Account Number:	\$
Debtor	To	Rates or Water / Sewer	Property / Account Number:	\$
Debtor	To	Debtor	Property / Account Number:	\$

To Property Address:

## Property Owners Consent

Name (Print)..... Signature.....

Date...../...../.....

Name (Print)..... Signature.....

Date...../...../.....

## Privacy and Personal Information Protection Notice

**Purpose of collection:** Public access to Council's documents.

**Intended recipients:** Council staff and is publicly available under the Government Information Public Access Act 2009.

**Supply:** Voluntary, a consequence of non-provision is that insufficient information will be provided.

**Access/Correction:** Requests for access / correction of information under the Government Information (Public Access) Act or Privacy & Personal Information Protection Act 1998, contact the Council's Right to Information Officer.

**Storage:** This form will be recorded in Council's Corporate Records Management System upon receipt.

**Please lodge this form with Richmond Valley Council by mail, in person, via fax or email**

### Office use only:

Property/Debtor number..... Name ID.....