RATES REFUND



Rate refunds incur a processing fee of \$40.00 per request to be paid on application. Please complete the payment details and email the completed form to **council@cityofparramatta.nsw.gov.au** for processing.

Payments by Cred	it Card (All information must be completed)
I authorise City of Parro	ımatta to debit my credit card, please charge my 🔲 Mastercard 🔲 Visa 🔲 Amex
Credit Card Number	
Expiry Date	CCV/CID* Amount
	\$ 40.00 (Pensioners are exempt the \$40.00 refund fee)
Date	Cardholder Name (Please Print) Cardholder's Signature
* For Mastercard and Visa C	CV is the 3 digits at the back of your card. For Amex CID is the 4 digits at the front of your card.
Please attach proof of p Refund will not be proc	essed without this.
Assessment Number	Are you a pensioner?
	Yes No
Address of Property	
Mailing Address	
Applicant Name	Applicant Phone Number
Email	
Are you the current own	ner of this property? are not the current owner, please provide more information (e.g. managing agent, previous owner) and
	rting evidence.
Please provide reason fo	or refund (e.g. overpaid in error, waste credit, paid wrong assessment number)

RATES REFUND

PHIVE Building,

5 Parramatta Square,

Parramatta New South Wales 2150

In person:



Refund me	ethod	
☐ Electro	onic funds transfer (EFT)	
Bank Name		BSB
Account N	lame	Account Number
intended recip provide will en available to the for access or a application in personal information	natta Council is collecting your personal information in order to e pient of the information is City of Parramatta Council. While the s nable City of Parramatta Council to process your application. The nird parties in accordance with Council's Access to Information Po amendment to personal information held by City of Parramatta C	olicy and Privacy Management Plan. You may make an application Council. City of Parramatta Council will consider any such n Act 1998. City of Parramatta Council is the agency that holds the
Declaratio	on	
I declare t	hat the information provided on this form is tru	e and correct.
Signature		
Please ret	urn the completed application by:	
Email:	council@cityofparramatta.nsw.gov.au	
Mail:	City of Parramatta PO Box 32, Parramatta NSW 2124	