

# Request for Payment Plan



## Notes:

1. All sections below must be completed.
2. Print clearly in black or blue ink and ensure the form is signed.
3. Only one application may be received per Infringement Notice.
4. This Personal Information is held in accordance with the *Privacy and Data Protection Act 2014* Principles.

Applicant details	
Are you the person (or authorised representative of the company) named on the Infringement Notice? <i>*If not you will need to complete the 'Consent to act' section at the end of this form</i>	Y / N
Surname or company name	
Given names or company ACN	
Residential or company address	
Postal address (if different to above)	
Home or office phone number	
Mobile phone number	
Email address	
Pension Concession Card number	
Health Care Card number	
Veterans' Affairs Pensioner Card or Gold Card number	

Infringement details	
Infringement number	
Date of notice	
Due date	
Penalty amount	
Additional costs incurred	
Total amount due	

Commitment to payment (minimum \$50 per fortnight)	
Frequency of payment	Weekly/Fortnightly
Payment amount	\$
Number of payments	

Declaration	
<p>✓ I declare that the information that I have supplied in this form, and any attachments to this form, are true and correct to the best of my knowledge.</p> <p>✓ I understand that if my request is approved I am committed to making the payments.</p> <p>✓ If I fail to make the agreed payments, my payment plan will default and I will be required to pay the full outstanding amount within 7 days. If I fail to pay, the infringement will proceed to the Magistrate's Court.</p>	
Signed 	Date

Consent to act	
*Please complete this section if another person is acting on your behalf	
I (person named on the infringement),	
of (address of person named on the infringement),	
give my consent to (name of person acting on your behalf),	
to apply for a payment plan on my behalf in regards to infringement number	
Signed  _____	Dated _____
(signature of person named on the infringement)	
Signed  _____	Dated _____
(signature of person receiving consent)	

Explanation of circumstances	
 Please attach an explanation of circumstances in support of application	