



TRIM Reference: _____

CENTREPAY – DEDUCTION AUTHORITY CONSENT

I, *Your Full Name:* _____CR Number: _____ *Customer Reference Number*

Address: _____

Phone Number: _____ Date of Birth: _____

Email Address: _____

Give permission for Services Australia to make to make a deduction of;

\$ _____ each fortnight from my _____
Total Amount *Type of Centrelink Payment*

And pay this amount to the City of Greater Geraldton, CRN 555-087-315-T for;

CGG Reference: _____
Reason for Deduction Commencing from: _____
Date

End Date: _____ Target Amount: \$ _____
if applicable *if applicable*

For the purposes of the *Privacy Act 1988*

I give permission for Services Australia to disclose my information to the City of Greater Geraldton for the purpose of checking my account number, billing number and amount I want to pay, and reconciling my payment deduction details.

I also authorise the City of Greater Geraldton to give Services Australia my correct account and billing number if required.

I understand that:

- It is my choice to have this amount deducted from my Centrelink payments, and that I can change or cancel the deduction at any time by contacting Services Australia or the City of Greater Geraldton.
- If I have a current Centrepay Deduction and I transfer to another eligible Centrelink payment in the future, my deductions may continue.

- If I have a current Centrepay Deduction and I lodge a new claim for Centrelink payment, the existing deduction(s) will not be carried over to the new payment and I will have to provide new Deduction Authority to have this set-up when the new payment is granted.
- If I stop using the City of Greater Geraldton’s service, but I do not stop my Centrepay Deduction, the City of Greater Geraldton may instruct Services Australia to stop the deduction.
- If my deduction has a target amount and final deduction is set to less than \$2.00, my second last deduction will be increased by up to \$2.00 to cover the final amount.
- My Deduction Authority consent will be noted on my account record with the City of Greater Geraldton.
- If I cease to be a customer of the City of Greater Geraldton, I will need to advise Services Australia to stop my deduction.

I have read and agree to the above terms and the information I have provided is correct.

Signature: _____ Date: _____

PLEASE NOTE

For more information about Centrepay, please head to the Services Australia website:
www.servicesaustralia.gov.au/centrepay-for-businesses

OFFICE USE

CXO/Rates: _____ Date: _____