

# APPLICATION FOR RATES PENALTY REMISSION



RATEPAYER NAME(S): \_\_\_\_\_

VALUATION NO(S):	PROPERTY LOCATION(S):	INSTAL NO:	YEAR:	PENALTY AMOUNT:
28 _____ - _____	_____	_____	OF 20 ____ / ____	\$ _____
28 _____ - _____	_____	_____	OF 20 ____ / ____	\$ _____
28 _____ - _____	_____	_____	OF 20 ____ / ____	\$ _____
28 _____ - _____	_____	_____	OF 20 ____ / ____	\$ _____

REASON FOR LATE PAYMENT(S):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RATEPAYER/APPLICANT NAME(S): \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## OFFICE USE ONLY

Payment History: \_\_\_\_\_

Details of previous remission applications: \_\_\_\_\_

Remission Approved:       Remission Declined:       DD Received Y/N:

Comments if any: \_\_\_\_\_

Signed: \_\_\_\_\_ (Rates Officer)

Dated: \_\_\_\_\_

Please return to:  
The Rates Officer  
Central Otago District Council  
PO Box 122  
ALEXANDRA 9340