



“Comfortable Country Living”

Debtors Agreement Form

Please complete the following form and return signed to Bogan Shire Council.

Business name: _____

Contact Name: _____

Phone: _____

ABN: _____

Mailing Address: _____

Street Address: _____

Email Address: _____

I agree that the above information provided is correct and agree to the terms and conditions stated.

Name: _____ **Position:** _____

Signature: _____ **Date:** _____

Terms and Conditions:

- Payments must be paid in full within 30 days of date on invoice.
- Failure to pay invoice on time may result in interest charges.
- Business must notify council of any changes to business name/address.
- Failure to make payments may result in credit being refused.
- Be aware of Council's debt collection policy.

NAR no:	OFFICE USE ONLY Officer:
Account no:	Record no:

Please note: details provided will remain confidential to Bogan Shire Council.

Derek Francis
General Manager

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