

## **Payment Plan Request Form**

## **Owner Details:**

Signature

Strata Plan				
Lot Number		Unit Number		
Property Address				
Mailing Address				
Owners Name		Email		
Mobile Number		Phone Number		
Reason For Seeking Payment Plan				
I/We hereby agree to make payments against my outstanding debt as per the following details;				
Total in Arrears		Instalment Amount		
Date of First Instalment		Date Arrears will be full (date payment pends)		
Frequency:	Weekly			
		Fortnightly		
		Monthly		
I/We declare:				
I am the owner of the above lot and acknowledge my obligation to pay the levy arrears, including any penalty interest incurred. As I am not able to pay the full amount due/payable, I submit this payment plan proposal for consideration by the Council of Owners. I acknowledge that if for any reason, I do not make payment as per the proposed schedule, the Strata Scheme may commence legal action to recover any outstanding debt without further notice, and the payment plan will terminate. I acknowledge that I will pay new levies and invoices as they fall due during the payment plan period. I acknowledge this is a request only and until I receive confirmation in writing the payment plan has not been approved.				
Signature		Date		
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Please return to: admin@bstratawa.com.au OR PO Box 230, West Perth WA 6872				
Council of Owners to Complete				
Date Received				
		Council - f O	t I	
Council of Owners Approved		Council of Owners Rej	естеа	
Reason for Rejection				
Name		Position		

Date