

APPLICATION FOR PAYMENT

PAYEE DETAILS

Name or Company

Street number Street name

Suburb Postcode

Contact phone number Email address

Receipt number

BANK ACCOUNT DETAILS

Account name

BSB number Account number

Signature/s Date

OFFICE USE ONLY

Ledger Account Amount (Incl.) GST (Y/N)

TOTAL PAYMENT

Payment
Details

Signature Requested by Authorised by

Name

Position

Please note if you are not the payee stated on the receipt, a signed authorisation must be attached signed by the original payee

Council is not liable for lost payments due to incorrect details

To be completed by the requesting Council officer

A copy of the receipt and/or supporting documents must be attached

I certify that this requisition is in accordance with the Delegations of Authority

CONTACT US

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