Centrepay Deduction Authority WMLALC 555 138 911J



Please complete this form if you would like to have your payments made directly from Services Australia to Dreamtime Housing. Ensure that all relevant sections are completed and sign the Authorisation on this form. Once completed forward or send this form to Dreamtime Housing.

| Your details | Title [Mr, Mrs, Ms, Miss, Mx | | | | | |
|--------------|----------------------------------|--------|---------------|--------|----------|--|
| | Last name or family name | | | | | |
| | Given name (s) | | | | | |
| | Date of Birth | DD / I | MM / YYYY |] | | |
| | Unit/House number | | Street/Avenue | | | |
| | Town/Suburb | | | | Postcode | |
| | Phone | | | Mobile | | |
| | Emailaddress | | | | | |
| | Centrelink Reference Number | | |] | | |
| | | | | | | |

Commencing Date:

Payment date for the deduction(s) to start from (a future payment date, up to 8 weeks in advance)

Please nominate amount to be taken out of your Centrelink payments each fortnight by completing the table below

| Type of Payment | Amount from (enter in Payment) | Amount from Family Tax Benefit | Total | Option 1 Target amount | Option 2 End date | Option 3 Neither 1 nor 2 |
|-----------------|-----------------------------------|-----------------------------------|-------|---|--|---|
| Rent | \$ | \$ | \$ | | | |
| Rent Arrears | \$ | \$ | \$ | | | |
| Water | \$ | \$ | \$ | | | |
| Water Arrears | \$ | \$ | \$ | | | |
| Other | \$ | \$ | \$ | | | |
| Other | \$ | \$ | \$ | | | |
| | | | I | Option 1 Setting up a target amount. I request that this deduction continue until the target | Option 2 Setting up an end date. I request that | Option 3 – selecting neither option 1 nor option 2 I confirm that this |

amount is reached. If a deduction has a target amount set, the final deduction will increase by up to \$2 to cover any remaining amounts of less than \$2

| Option 3 – selecting |
|----------------------|
| neither option 1 nor |
| option 2 |
| I confirm that this |
| deduction has no |
| target amount and no |
| end date. |

this deduction continue until the

date is reached.

Australian Privacy legislation protects your personal information.

I give permission for Dreamtime Housing to disclose my information to Services Australia for the purposes of checking my account number, billing number and amount I want to pay, and reconciling my payment deduction details.

I understand that:

I can change or cancel my deduction at any time and further information about Centrepay can be found online at servicesaustralia.gov.au/centrepay

| Please sign this form | Name: | × | | |
|-----------------------|-----------------|----------------|--|--|
| | Your signature: | × | | |
| | Date: | DD / MM / YYYY | | |
| | | | | |