

Your signature _

Centrepay Deduction Authority - RENT

Name		
Date of Birth	nCRN	
Address		
I give permis	ssion for:	
	stralia (the Agency) to make a Regular Deduction from my Centrelink benefit a 's Housing Company (WHC), CRN 555 025 867 H, for RENT :	and pay this amount to
\$	<pre><amount>, each fortnight week, commencing from</amount></pre>	<start date=""></start>
deducted fro	om my	<payment type=""></payment>
I authorise tl	the Women's Housing Company (WHC) to:	
	e my information to the Agency for the purposes of checking my account, billi nount I want to pay, and reconciling my payment Deduction details, and for th 38	
give the	e Agency my correct account, billing or reference number if required	
•	my rental Deduction from time to time to ensure my housing payments are nts, unless I provide new authorisation to do so	met, not including arrears
I understan	nd that:	
	nange or cancel my Deduction at any time, however I will be required to make	e alternative arrangements
	my Rent if I am continuing my rental agreement or if I have any rent owing	wastant a Dadwatian
	cel my Deduction, I will be required to give new consent before the WHC can behind in my rent, the WHC cannot increase my Deduction to catch-up until I	
OPTIONAL (f	for rent arrears):	
•	at an additional Regular Deduction be made for rent arrears . Once the target e Deduction amount will then reduce to my agreed ongoing Regular Deduction	
\$	<pre><amount>, each fortnight week, until \$</amount></pre>	<target amount=""></target>
OR	<end date="">, from my</end>	<payment type=""></payment>
I understand	d that:	
the Wo	nsent, once signed, is effective for the services indicated, and only for the peromen's Housing Company (WHC)	
•	ime the WHC provides information to the Agency for Centrepay, I will be adv IC will maintain a record of my consent for a minimum of two years beyond t	_
	information about Centrepay can be found online at servicesaustralia.gov.a	u/centrepay
-	clare that I have read (or had read to me) and understand the services descr d consent and authority as indicated	ibed above and I provide

_____ Date _____