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ABN: 68 284 130 046

<p><u>Office Use:</u></p> <p>Document ID: Account No.: Account Status:</p>

Notification of Property Settlement

All fields are required to be completed.

NOTE: A Final Account will not be raised until this form is completed by conveyancers.
 A special meter read fee will be applied.

Account Property/Owner Details

Property Address: _____

Account Name: _____

Contact Number: _____ Email Address: _____

Forwarding Postal Address: _____

Conveyancers Details

Organisation Name: _____
(Please note readings will occur weekdays only, excluding public holidays)

Contact Number: _____ *Email: _____
(Please note the Final Billing Notice will be sent to above email)

Request

Required Date of Meter Reading: _____ *(Date of Settlement)*
(Please note readings will occur weekdays only, excluding public holidays)

It is understood that the property will be owned by: _____

Acknowledgement

I understand and acknowledge that:

- The information provided in this request for a Notification of Property Settlement form is true and complete to the best of my knowledge.
- Roxby Water may refuse the application of this form if it becomes evident that information or any supporting documentation provided is incomplete or false.
- I authorise Roxby Water to raise charges on this account as per my request on behalf of the vendor stated above and agree that all charges will be paid by the pay by date stated on the issued final notice or late fees may apply and/or may result in debt collection

Full name of person completing this application: _____

Signature of person completing this application: _____ Date: ____ / ____ / ____