

Customer Service | 1300 292 872 PO Box 816 Murwillumbah NSW 2484 Fax (02) 6670 2429 | ABN 90 178 732 496 tsc@tweed.nsw.gov.au | www.tweed.nsw.gov.au

Property Settlement Payment Allocation Details

Revenue & Recovery

| Please return this completed form with your settlement cheque | | | | | | | | | |
|---|---------------|---------|---------------|----------|-----|--|--|--|--|
| A1. Reference Date: Your Reference: | | | | | | | | | |
| A2. Property Description | | | | | | | | | |
| Lot No | | Section | | DP/NPP/ | /SP | | | | |
| Unit/Street No | | Street | | | | | | | |
| Suburb/Town | | | | | | | | | |
| A3. Details | | | | | | | | | |
| Transferor/ Vender: | | | | | | | | | |
| Transferee/ Purchaser: | | | | | | | | | |
| | Name 1: | | | | | | | | |
| 1 | Phone Mobile: | | | | | | | | |
| Y. | Email: | | | | | | | | |
| Purchaser Contact Information: | Name 2: | | | | | | | | |
| | Phone Mobile: | | | | | | | | |
| | Email: | | | | | | | | |
| Settlement Date: | | | | | | | | | |
| Conveyancer Name/Address: | | | | | | | | | |
| Phone Number: | | | | | | | | | |
| A4. Settlement | t Cheque Deta | ils | | | | | | | |
| Property Identifier: | | | | | | | | | |
| Settlement cheque distribution: | | To | o be applied | to Rates | \$ | | | | |
| | | | o be applied | | \$ | | | | |
| | | To b | be applied to | Debtors | \$ | | | | |
| | | | Total of | f Cheque | \$ | | | | |