

## **APPLICATION FOR PAYMENT ARRANGEMENT**



Section 42 of the Fines Reform Act 2014

All relevant sections must be completed in **BLOCK LETTERS**.

You can apply for a payment arrangement for ALL matters, e.g. infringement fines, court fines. Company details must be of the corporation named in the fine(s).

COMPANY DETAILS	
1. Your contact details	3. Reference number
Family name (Surname)	Obligation number, case number, debtor ID or infringement number*
First name	* Only one reference number is required. Your application will apply to all of your outstanding fines, except any listed at question 4.
	4. Reference number(s) NOT to be included
Position in company	Please list any reference numbers you do <b>not</b> want to be included in your payment arrangement.
Position contact number	
<b>Note:</b> You must be authorised to act on behalf of the company to complete and sign this application.	
2. Company details	
Company name	Provide further references on a separate page.
	Note: If you do not complete this section, all outstanding fines with Fines Victoria will be considered as part of this application.
ACN	5. What are you requesting?
	5. What are you requesting.
Company business address	Additional time to pay the fine/s in full (Go to question 6).
	To pay the outstanding balance by instalments (Go to question 7).
	6. Additional time to pay
Postcode	I will pay the full amount by*
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Company postal address (if the same as company business address write 'As above')	
	* Not more than three months from the date of the application
	Go to question 12
Postcode	
Email address	
The company consents to receiving documentation electronically.	
Other contact number(s)	

**WARNING** | Section 184 of the Fines Reform Act 2014 states that a person must not intentionally provide false or misleading information in any written statement required by or under that Act. **PENALTY: 10 PENALTY UNITS** 

If the statement is found to be false or misleading, any existing payment arrangements may also be cancelled.

If Fines Victoria offers you a payment arrangement, failure to make the first payment by the due date will result in the arrangement being cancelled. This may result in further costs being added and/or enforcement action being taken against you.

**REMEMBER** | It is your responsibility to ensure that each payment is made on or before the due date.

## FINANCIAL DETAILS What is the maximum amount you could pay? 11. Please provide statement of profit and loss Maximum amount payable (fortnightly)\* Item of profit (or loss) Amount 0 Fortnightly 0 Dividends \$ Interest \$ $\bigcirc$ r Material profits (or losses) arising \$ Maximum amount payable (monthly) from the sale of non-current assets 0 Monthly Material increases (or decreases) arising from re-evaluation of non-\$ Preferred starting date of repayments current assets D D **J** M M **J** Y Y Y Material transfers from (or to) \$ provisions (Within 3 months of today's date) Abnormal items \$ Interest \$ 8. **Direct debit payment** Bad or doubtful debts \$ Is the company interested in establishing Depreciation of particular assets \$ a direct debit arrangement with your bank/ financial institution? Total profit(loss) \$ Note: If you select yes, you will be provided with further information on this option in the future. 12. Exceptional financial circumstances Please provide any exceptional financial circumstances you would 9. Please provide details of the company's assets like to be considered for this application and attach any supporting documentation **Current assets** Amount Money in bank/Building Society/ \$ Supporting documentation attached Credit Union Investments \$ Receivables \$ 13. Checklist Inventories \$ Please use the checklist below to ensure you have completed all sections Other current assets \$ Non-current assets \$ Company details Evidence attached \$ Investments Additional pages Financial details Property, plant & equipment \$ attached (if used) Intangibles \$ Other non-current assets \$ Declaration **Total assets** \$ I declare that the contents of this application are true and correct to the best of my knowledge. I understand that my application will be assessed based on the Please provide details of the company's liabilities information I have provided. **Current liabilities** Amount SIGN AND DATE HERE Creditors and borrowings \$ Provisions \$ Other \$ D D / M M / Y Y Y Non-current liabilities \$ **Total liaiblities** \$ I am authorised to sign on behalf of the company No **UPON COMPLETION**

Mail to: Fines Victoria, PO Box 14487, Melbourne 8001, You should receive a response within 21 working days from receipt of your application.

Submit online: www.fines.vic.gov.au/contact-us (click submit an online enquiry) Fines Victoria Ground Floor, 277 William Street Melbourne, Victoria Submit In person:

**FURTHER ENQUIRIES** If you have any questions regarding this application, please contact Fines Victoria on (03) 9200 8222.

Do you require legal assistance?

You may be able to obtain assistance from one of the following organisations:

- , Victoria Legal Aid | www.legalaid.vic.gov.au
- Victorian Community Legal Centres | www.communitylaw.org.au Victorian Aboriginal Legal Service | www.vals.org.au

The Department of Justice and Community Safety collects personal information for the purposes of dealing with and enforcing your outstanding fines. Personal information may also be disclosed to third parties as authorised by the Privacy and Data Protection Act 2014 and Health Records Act 2001.