



**OBERON COUNCIL**

# OBERON COUNCIL

## Rate Notice / Instalment Notice

A.B.N. 13 632 416 736  
Council Office: 137-139 Oberon Street, Oberon, NSW 2787  
Postal Address: P.O. Box 84, Oberon NSW 2787  
Office Hours: 8:30am to 4:30pm Monday to Friday  
Telephone: (02) 6329 8100

Assessment No.

12394253

Rating Year

01/07/2017 to 30/06/2018

Issue Date

23/10/2017

Due Date

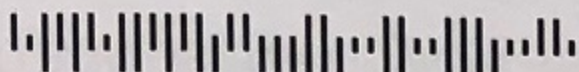
30/11/2017

Valuation Date

01/07/2016

Rateable Value

\$413,000



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I001735

The office of the Council is situated at 137-139 Oberon Street, Oberon and will be open for payments between the hours of 8:30am to 4:30 pm Monday to Friday inclusive.

[www.oberon.nsw.gov.au](http://www.oberon.nsw.gov.au) to check out other important messages

In accordance with the Local Government Act 1993 Notice is hereby given that the undermentioned land has been rated by the Council as shown hereunder.

**Description and Location of Property**  
2072 Edith Road OBERON NSW 2787  
Lot 19 DP 1182891

PARTICULARS OF RATES AND CHARGES	UNIT	CENTS IN \$	AMOUNT
ARREARS			\$368.72
Second Instalment			\$364.00
<b>NET AMOUNT DUE</b>			<b>\$732.72</b>



Any payments made on or after 13 October 2017 will not be reflected in the balance of this account.

1st Instalment	2nd Instalment	3rd Instalment	4th Instalment	Total Amount
	\$364.00 Due 30/11/2017			\$732.72

**PAYMENT OPTIONS** See reverse for more details

Mail   
 In Person   
 By Phone   
 BPAY   
 Post Billpay   
 For emailed notices: [oberon.enotices.com.au](http://oberon.enotices.com.au)  
Reference No: 42F849E8FC

## OBERON COUNCIL



Bill Code: 10082  
Reference No: 12394253

BPAY® this payment via Internet or phone banking.  
BPAY View® - View and pay this bill using internet banking.  
BPAY View Registration No.: 12394253



Post Billpay

Billpay Code: 4214  
Ref: 1239 4253

Pay in-store at Australia Post,  
online at [auspost.com.au/postbillpay](http://auspost.com.au/postbillpay),  
by phone 13 18 16 or via AusPost app

IF YOU ARE MAKING A PAYMENT AT THE COUNCIL OFFICE  
PLEASE TICK HERE IF A RECEIPT IS REQUIRED

Name: [Redacted]  
Assessment Number: 12394253  
Total Amount: \$732.72  
Instalment Amount Due: \$364.00  
Due Date: 30/11/2017

AMOUNT PAID

[Empty box for recording amount paid]

POST billpay



\*4214 12394253