



## Acknowledgement & Agreement to Repay Debt

This form is to be completed by a client to acknowledge and agree to repay a debt owed to a social housing provider. For information or assistance with this form, phone **1800 422 322**, 24 hours a day, seven days a week. Please print in BLOCK LETTERS with a black or blue pen. Please mark relevant boxes with a . If you need more room to answer any questions, please include details on a separate page and attach it to this form.

Payment reference number

### Declaration

I, the undersigned

Title  
Mr, Mrs, Ms, Miss, Mx

Last name or family

Given name (s)

Unit/House number

Street/Avenue

Town/Suburb

Postcode

Phone

Mobile

Email address

### Acknowledge that a sum of:

Amount in words

Amount in figures

### Arising from the lease of the property at:

Unit/House number

Street/Avenue

Town/Suburb

Postcode

### Between the dates of:

and

Is owed to: Name of social housing provider

- For: (tick applicable box)
- Rent arrears
  - Property damages
  - Other — give details
  - Water usage
  - Rentstart Bond Loan

In consideration of the above named social housing provider not taking legal action to recover the above debt I agree to repay the debt by regular instalments at the amount of:

per week / fortnight

With the first payment to commence by:

I agree that if there is a failure to comply with the instalment agreement, then the total debt outstanding becomes immediately due and payable and the social housing provider may proceed to enforce the debt through legal action.

Applicant/Tenant signature

**In the presence of** (authorised delegate of the social housing provider)

Full name (please print)

Signature

Date

**Please note:**

If you have difficulty making repayments and need to discuss repayment options, please contact:

- your local Housing Officer for tenancy related accounts and information.