



**PENALTY REMISSION**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**RATES ASSESSMENT NO:** \_\_\_\_\_

**Date** \_\_\_\_\_

Manager Financial Services  
New Plymouth District Council  
Private Bag 2025  
NEW PLYMOUTH

Dear Sir

I wish to request that you consider remitting the penalty on my rates account. I was not able to pay by the penalty date for the following reason:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for your consideration.

Yours faithfully

\_\_\_\_\_

**Instalment and amount:**  
**Penalty amount:**  
**Amount paid and date of receipt:**