



Credit card payment authority

Use this form to pay a fee or charge by credit card. This form authorises NCAT to process the payment. Send the form by post or in person. NCAT Registry locations and the current list of fees and charges are available at www.ncat.nsw.gov.au.

YOUR DETAILS

Please provide details of person making the payment.

| | | | |
|----------------|--------------------------------|----------|----------------------|
| Full name | <input type="text"/> | | |
| Address | <input type="text"/> | | |
| | <input type="text"/> | Postcode | <input type="text"/> |
| Email address | <input type="text"/> | | |
| Contact number | Telephone <input type="text"/> | Mobile | <input type="text"/> |

FEE OR SERVICE TYPE

Matter type if applicable Consumer and Commercial Division Administrative and Equal Opportunity Division
 Guardianship Division Occupational Division Appeal Panel

NCAT File number if available

| | | | |
|-----------------------|--|----------------|----------------------|
| Fee or service | <input type="checkbox"/> Application | \$ | <input type="text"/> |
| | <input type="checkbox"/> Sound recording | \$ | <input type="text"/> |
| | <input type="checkbox"/> Other | \$ | <input type="text"/> |
| | | Please specify | <input type="text"/> |

CREDIT CARD DETAILS

The following surcharges apply to credit card transactions. Visa and Mastercard - 0.4%, American Express - 1.4%, Diners Club - 1.5%

| | | | | | | | | | | | | | | | |
|-------------------------------|-------------------------------|-------------------------------------|---|--------------------------------------|----------------------|----------------------|----------------------|----------------------|--|----------------------|----------------------|----------------------|----------------------|----------------------|--|
| Card type | <input type="checkbox"/> Visa | <input type="checkbox"/> Mastercard | <input type="checkbox"/> American Express | <input type="checkbox"/> Diners Club | | | | | | | | | | | |
| Card number | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| Expiry date | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | CVV / CVN | <input type="text"/> | <input type="text"/> | <input type="text"/> | <i>Last 3 digits of number in card signature panel</i> | | | | | | |
| Cardholder's name | <input type="text"/> | | | | | | | | | | | | | | |
| Cardholder's signature | <input type="text"/> | | | | | | | | | | Date | <input type="text"/> | | | |

DO NOT EMAIL THIS FORM. To protect the security of your personal details, NCAT cannot accept credit card details by email, including PDF attachments. This is in accordance with the Payment Card Industry Data Security Standard.