



Office of Criminal Injuries Compensation Criminal Injuries Compensation Recoveries

Telephone: (08) 9425 3270
Email: clcrecoveries@justice.wa.gov.au

GPO Box F317
PERTH WA 6841

Centrepay is a free direct bill paying service available to customers who receive an Australian Government Department of Human Services Centrelink payment, family assistance payment or Parental Leave Pay. Go to the [Centrepay website](#) for more information.

Part A – Your Details (Must be Completed)

Human Services Customer Reference Number (CRN): _____

Family Name: _____

Given Name(s): _____

Date of Birth: _____

Telephone Number: _____

Mobile: _____

Address: _____

Suburb: _____ Postcode: _____

Part B – Service Providers Details (Must be Completed to Start Deduction)

Service Provider's Name: Criminal Injuries Compensation Recoveries

Service Provider's Centrepay Reference Number: 555-060-787X

Service Provider's Address: GPO Box F317 PERTH WA 6841

Service Provider's Phone Number: (08) 9415 3270

Type of Bill: Compensation Reimbursement

Your Customer Reference: _____

Part C – To Start a New Deduction

From which Centrelink payment do you want the deduction to be taken (eg Age Pension, Newstart Allowance, Family Tax Benefit or Parental Leave Pay)?

What amount do you want deducted each fortnight? \$_____

(Minimum is \$10.00)

Which payday do you want the deduction to start from? (Must be within 28 days from the signature date at the end of this form)

(Please select one option)

Your next available date **or** **Date:** _____

Do you want to specify a target amount?

Yes - Target Amount: \$_____

No - Continue deductions until cancelled.

Part D – To Change your Current Deduction

To change your current deduction contact the Recoveries Office on (08) 9425 3270 or email cicrecoveries@justice.wa.gov.au.

Part E – Authorisation (Please Complete)

- **I authorise Australian Government Department of Human Services to:** Make the nominated deduction and pay the amount to Criminal Injuries Compensation.
- **I give permission for:** The information on this form to be given to the relevant Criminal Injuries Compensation Recoveries stated on the form.
- The Criminal Injuries Compensation Recoveries I have nominated on this form to provide my correct account number to Human Services if required.
- **I understand that:** If I have a current Centrepay deduction and I lodge a new claim, that the existing deduction(s) will not be carried over to the new payment.
- It is my choice to have this amount deducted from my Human Services payments, and I can change my Centrepay deduction at any time.
- If I stop using Criminal Injuries Compensation Recoveries but do not stop my Centrepay deduction, Criminal Injuries Compensation Recoveries may stop the deduction.

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Signature

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Date