



NORTH AYRSHIRE COUNCIL

RENT DEDUCTIONS FROM WAGES

Name:

Weekly/Fortnightly/Monthly

Address:

Amount £

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This is to certify that I herewith authorise North Ayrshire Council to deduct from my weekly/fortnightly/monthly wages in respect of rent and to amend this deduction as and when changes occur in my rent.

Works No:

Department:

House Reference No:

Signed:

Home Tel. No.

Works Tel No.

Date:

Please return to: North Ayrshire Council, Rent Accounting Team, Housing Services, 5th Floor, Cunninghame House, IRVINE, KA12 8EE.