

5 Lawrence Street, BEAUFORT VIC 3373 ABN 94 924 356 468

Q 1300 797 363

pyrenees@pyrenees.vic.gov.au

pyrenees.vic.gov.au

All applications will be treated as **Strictly Confidential**

Name			
Residential Address	·		
Postal Address			
Contact Details	Home Phone	 Mobile	Other
	Home I home	Wiobiic	Other
Email address			
Do solemnly and sir	ncerely declare that I/we are	e the owner of the following	property/s in the
Pyrenees Shire Cou	ncil:		
Assessment (eg. A1234)			
The following are the Name	ne particulars of the other po Relationship	ersons residing at the above Оссиј	premises: pation

In order for your application to be considered, you MUST provide a copy of your:

- a) Bank Statement
- b) Income Details
- c) Tax Assessment Notice





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The below circumstance/s have impa	cted on my/our ability to repay o	debt owed to Council:
I MAKE THIS SOLEMN DECLARATION		
provisions of an Act of Parliament of V wilful and corrupt perjury.	ictoria rendering persons making	g a false declaration punishable for
Signed		Date

The Pyrenees Shire Council considers that the responsible handling of personal information is a key aspect of democratic governance and is strongly committed to protecting an individual's right to privacy. Council will comply with the Information Privacy Principles as set out in the Information Privacy and Data Protection Act 2014. The personal information required on this form will only be used by Council for the intended purpose. The information will not be disclosed to any other party unless Council is required to do so by law. You can view and change the information by contacting Customer Service on 1300 PYRENEES (1300 797 363) during business hours.



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OFFICE USE ONLY					
Please use a separate page if there are multiple assessments within the application.					
Assessment VG Number Add		dress			
KEY DATES					
Application sent to client		Application returned to Council			
Application Acknowledged		Application Approved/Declined			
Client Advised of decision		Synergy amended (if			
FINANCIAL IMPACT					
Interest Deferral		Interest waived			
Rates Deferral					
Rates Waiver		Rates waived			
AUTHORISATION (signed as required)					
Officer	Name Signature				
Rates Officer	_				
Manager Finance					
Director					
CEO					
Councillor					