

APPLICATION FOR INTERNAL REVIEW FOR INFRINGEMENTS ONLY

Please complete all sections below to have your Infringement reviewed.

Note: 1) Only one Internal Review may be submitted per Infringement Notice.

MITCHELL SHIRE COUNCIL



Section 1- Applicant's Details (The person making the application) - Please tick (✓) the relevant

You are: [] Person named on the infringement (OR) [] Other person with consent (Must also complete the "Consent for Internal Review section" on page 2) (OR) [] Authorised Company Representative

Name of Applicant: Given Name, Surname, Corporation Name and ACN/ABN, Street Number and Street Name, Suburb, State, Postcode

Section 2 - Infringement Details (Please complete a separate form for each infringement you wish to have reviewed)

Infringement No. []

Infringement Type (please tick one):

- [] Parking Infringement [] Animal Control Infringement [] Local Law Infringement [] Litter Infringement [] Country Fire Authority Infringement [] Other Infringement Notice

Section 3 - Grounds for Application (Please tick the relevant box (see descriptions on page 2))

- [] Exceptional circumstances (see description 1 on page 2) [] Contrary to Law (see description 2 on page 2) [] Special Circumstances (see description 3 on page 2) [] Mistaken Identity (see description 4 on page 2)

Explain circumstances/grounds for your application here (please attach a separate sheet if you require more space):

Large empty text box for explaining circumstances/grounds for the application.

I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s.22 (2) (e) of the Infringements Act 2006.

Signature of Applicant _____ Date / /

Send this application together with any supporting evidence to: Mitchell Shire Council 113 High Street, BROADFORD VIC 3658 mitchell@mitchellshire.vic.gov.au

DESCRIPTION OF RELEVANT GROUNDS FOR INTERNAL REVIEW APPEAL

1) Exceptional Circumstances

Please provide details of the exceptional circumstances surrounding your case and provide reasons why your circumstances or situation are such that the infringement should be Withdrawn or an Official Warning issued.

2) Contrary to Law

Please provide the reasons why you consider the decision to issue you with an infringement unlawful.

3) Special Circumstances

Special Circumstances are:

- a. A mental or intellectual disability, disorder, disease or illness
- b. A serious addiction to drugs, alcohol or a volatile substance
- c. Homelessness

You must provide evidence from one of the following parties that you suffer from one or more of these conditions and attach to this application:

- a. A case worker, case manager or social worker
- b. A general practitioner, psychiatrist or psychologist
- c. An accredited drug treatment agency

You must also prove that the condition prevented you from realising that the conduct was an offence or from controlling that conduct.

4) Mistaken Identity

Please provide the reason/s why you believe there has been a case of mistaken identity and identify the name and address of the person involved and the relationship of that person to you.

If you wish to nominate another driver or owner of a vehicle for a parking offence, you must complete a nomination statement. A nomination statement can be obtained by attending a council office or by visiting www.mitchellshire.vic.gov.au

Applicants please note:

If you do not provide sufficient information, the enforcement agency may request further information. If you do not provide this further information within 28 days of the date of request, the enforcement agency may determine the application without the further information.

CONSENT FOR INTERNAL REVIEW

(To be completed if another person is acting on your behalf)

I *(person named on the infringement)*.....,
of *(address of person named on the infringement)*....., give my
consent to *(name of person making the application on your behalf)*....., to apply for an Internal
Review on my behalf in relation to Infringement Number

SIGNED *(Person named on the infringement)* (Date)

SIGNED *(Other person with consent)* (Date)

ACTION BY COURT

I*/the company decline to be dealt with under these enforcement provisions and want to have the matter dealt with by court.

Signature of Applicant _____

Date / /