



Application for Internal Review

(Infringement Notices Only)

Applicant details							
Who is applying (confirm who is making the application)							
<input type="checkbox"/> Person named on infringement notice	<input type="checkbox"/> Other person with consent <small>(you must complete the 'Consent for Internal Review' on reverse side of this page)</small>	<input type="checkbox"/> Authorised company representative					
Your personal details							
Full Name							
Corporate name and ACN (if applicable)							
Address of person / Corporation (outcome will be sent here)							
		State	Postcode				
Telephone							
(H)	(W)	(M)					
Email							
Infringement details							
Infringement notice number/s		Vehicle registration (if applicable)					
Infringement type (confirm type of infringement received)							
<input type="checkbox"/> Animal	<input type="checkbox"/> Building	<input type="checkbox"/> EPA	<input type="checkbox"/> Fire				
<input type="checkbox"/> Local Laws	<input type="checkbox"/> Parking	<input type="checkbox"/> Planning	<input type="checkbox"/> Other:				
Grounds for application							
<small>Descriptions are located on the reverse of this page. You must select one ground for this application</small>							
<input type="checkbox"/> Exceptional Circumstances <small>See description 1</small>	<input type="checkbox"/> Contrary to Law <small>See description 2</small>	<input type="checkbox"/> Special Circumstances <small>See description 3</small>					
<input type="checkbox"/> Mistaken Identity <small>See description 4</small>	<input type="checkbox"/> Person Unaware <small>See description 5</small>	<input type="checkbox"/> Penalty Reminder Notice Fee Waiver Request <small>See description 6</small>					
Declaration details							
<p><i>I understand that this is the only internal review for this infringement that I am able to submit pursuant to s.22(2) of the Infringements Act 2006.</i></p> <p><i>I declare that the information that I have supplied in this form, is true and correct to the best of my knowledge.</i></p> <p><i>I understand that by making a false or misleading statement in support of this claim, I may be prosecuted.</i></p>		<table style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #cccccc;"> <td style="padding: 5px;">Signature of applicant</td> </tr> <tr> <td style="height: 40px;"></td> </tr> <tr style="background-color: #cccccc;"> <td style="padding: 5px;">Date</td> </tr> <tr> <td style="height: 40px;"></td> </tr> </table>		Signature of applicant		Date	
Signature of applicant							
Date							

Description of relevant grounds for internal review appeal	
1.	Exceptional Circumstances Please provide details of the exceptional circumstances (where you have committed the offence due to unforeseen or unpreventable circumstances, e.g. medical emergencies).
2.	Contrary to Law Please provide the reasons why you consider the decision to issue you with an Infringement was contrary to law. For example, this ground can be used if you believe that the infringement notice is not valid, or that an infringement officer has acted unlawfully, unfairly, improperly or beyond their authority in taking that action or decision.
3.	Special Circumstances Special circumstances include: <ul style="list-style-type: none"> a mental or intellectual disability, disorder, disease or illness a serious addiction to drugs, alcohol or volatile substance homelessness, or family violence within the meaning of the <i>Family Violence Protection Act 2008</i>. For more information please visit Fines Victoria Family Violence Scheme. You must provide evidence (e.g. letter, report, statement) from one of the following parties to support your application: <ul style="list-style-type: none"> a case worker, case manager or social worker a general practitioner, psychiatrist or psychologist, or an accredited drug treatment agency. Evidence (e.g. letter, statement or a report) from a practitioner or case worker should include the following information: <ul style="list-style-type: none"> the practitioner/case worker's qualification and relationship with you, including the period of engagement the nature, severity and duration of your condition or your circumstances, whether you were suffering from the relevant condition or circumstances at the time the offence was committed, and whether, in the opinion of the practitioner/case worker, it is more likely than not that your condition/ circumstances resulted in your inability to understand or control the conduct constituting the offence. The practitioner or agency report must show that because of your condition/circumstances you could not understand or control your conduct constituting the offence.
4.	Mistaken Identity Please provide an explanation of why you rely on the ground of mistaken identity (including evidence e.g. copy of your drivers licence, in support).
5.	Person Unaware of Fine An application made on the ground of 'person unaware' must: <ul style="list-style-type: none"> be made within 14 days of you becoming aware of the infringement notice (you may evidence the date that you became aware of the infringement notice by executing a statutory declaration) state the grounds on which the decision should be reviewed, and provide your current address for service.
6.	Penalty Reminder Notice Fee Waiver Request Please provide the reason(s) why you believe the Penalty Reminder Notice Fee should be waived. Note: The original penalty amount is still applicable under this request.

Applicants please note:

Upon receipt of an internal review the infringement will be placed on hold until an outcome has been reached. You will receive the outcome of the review in writing. If you do not provide sufficient information, Council may request further information. If you do not provide this further information within 21 days of the date of request, Council may determine the application without further information.

Consent for internal review	
To be completed if another person is acting on your behalf.	
I	(person named in the infringement)
of	(address of person named on infringement)
give my consent to	
to apply for an Internal Review on my behalf for the applied infringement number/s.	
Signature of person named on infringement	Signature of other person with consent
Date	Date

Privacy statement: Your personal information will be handled in accordance with the *Privacy and Data Protection Act 2014* and used for the specified purpose. You can access your personal information by contacting Council's Privacy Officer on 1300 229 229 (1300 BAW BAW).

Please attach explanation and ground(s) in support of application