

Claim for inclusion on the 2021 roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Burwood Council.

Form for individual owners, occupiers and ratepaying lessees

Instructions: This form must be received by the general manager of Burwood Council

by 6:00pm (EST) Monday 26 July 2021.

By post: PO Box 240, BURWOOD NSW 1805

By hand: Customer Service Centre at 2 Conder Street, BURWOOD

By email: council@burwood.nsw.gov.au

Do not use this form if you need to nominate an elector.

Use instead Form for nomination of an elector by joint/several, corporate or trustee owners, occupiers or ratepaying lessees.

Note: A person may not be enrolled more than once for the same ward. A person who is qualified for enrolment in more than one ward in a Council area may only be enrolled in the ward in which the person is qualified as a resident. If the person is not a resident, they may be enrolled in the ward specified in a notice by the person to the Council's general manager before the closing date for the election, or if no such notice is given, a ward chosen by the general manager. Overall a person cannot vote more than once is any Local Government Area.

| Section 1 - Property details | |
|--|--------------------------------|
| Lot #: DP/SP#: For ratepaying lessees only – Rates assessment number: | |
| Suite/Level/Unit/Street Number & Street Name: | |
| Town/Suburb: State: Postcod | e: |
| Council & Ward | |
| Section 2 – Claimant's details | |
| Surname: Given name(s): | |
| Date of birth:/ | |
| Residential address | |
| Phone number: Email address: | |
| Postal address (If different to residential) : | |
| I am the (tick one): Owner Ratepaying Lessee Occupier of the property described in | n Section 1. |
| For occupiers only – Date our occupancy expires:/ | |
| For ratepaying lessees only – Date until which we are liable to pay rates:// | |
| I am entitled to enrol and claim the inclusion of my name on the roll of non-resident owners of rateable land ratepaying lessees for: Burwood Council. | d or the roll of occupiers and |
| I am already enrolled in in the local government area of Burwood Council. | |
| (tick one): Yes No | |
| Claimant's signature | Date// |
| Section 3 – Statement by witness | |
| I am of or above the age of 18 years. I saw the claimant sign this claim, and believe, to the best of my know the claim are true. | wledge that the statements in |
| Witness surname: Witness given name(s): | |
| Witness signature: | Date / / |

| OFFICE USE ONLY |
|--|
| Date received/ Received by: |
| Processed date/ Processed by: |
| Claim allowed? Yes No Elector informed of outcome? Yes No Date/ |
| |