

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 25 October 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:	
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 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 or the roll of or ratepaying lessees for: Burwood Council.	cupiers 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 knowledge that the street the claim are true.	statements in
Witness surname: Witness given name(s):	
Witness signature:	/

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