



Infringement Offences

APPLICATION FOR INTERNAL REVIEW INFRINGEMENTS ACT 2006

i Please complete all sections below to have your infringement reviewed.

- 1) Only one Internal Review may be submitted per Infringement Notice, unless applying when an internal review has been granted on the grounds of Person Unaware of Fine.
- 2) All applications must be in writing, including your name and address.
- 3) Once your application is received, your infringement will be placed on hold whilst a review is undertaken.

SECTION 1 – APPLICANT DETAILS (THE PERSON MAKING THE APPLICATION)

<input type="checkbox"/> Person Named on the Infringement Notice	<input type="checkbox"/> Other person with consent <small>(You must complete the 'Consent for Internal review' on page 2)</small>	<input type="checkbox"/> Authorised company representative

Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="checkbox"/>	First Name _____	Surname _____
Mailing address _____		
_____	Suburb _____	Postcode _____
Phone number _____	Email _____	

SECTION 2 - INFRINGEMENT NOTICE DETAILS

Infringement Notice Number _____ Vehicle Registration Number (if applicable) _____

Infringement type: Animal Local Law Litter Health Parking Other

SECTION 3 – GROUNDS FOR APPLICATION - PLEASE TICK THE RELEVANT BOX (SEE DESCRIPTIONS ON PAGE 2)

<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 of Fine <small>(see description 5)</small>	<input type="checkbox"/> Penalty Reminder Notice/Fee Waiver Request <small>(see description 6)</small>

Explain the reason for your application (attach additional documents to support your application e.g. medical reports, photographs etc)

DECLARATION

I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s22(2) of the Infringements Act 2006.	Signature of Applicant _____
I declare that the information that I have supplied in this form, and any attachments to this form, are true and correct to the best of my knowledge.	Date _____
I understand that by making a false or misleading statement in support of this claim, I may be prosecuted.	

Privacy Collection Statement: Mildura Rural City Council collects Personal and or Health Information for municipal purposes as specified in the Privacy and Data Protection Act 2014. The information collected in this form is used only for the purposes specified (primary purpose) and is not passed on to third parties. Council may disclose this information but only if authorised or required by law. Council may not be able to process your request unless sufficient information is given. Should you need to change or access your personal details, or you require further information regarding Council's Privacy Policy please contact Council's Privacy Officer.

DESCRIPTION OF RELEVANT GROUNDS FOR INTERNAL REVIEW

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). Not knowing the law or forgetfulness are not exceptional circumstances.

2) Contrary to Law

Please provide the reasons why you consider the decision to issue you with the infringement notice is unlawful. (e.g. the Infringement was not valid).

3) Special Circumstances

Special Circumstances include:

- a mental or intellectual disability, disorder, disease or illness
- a serious addiction to drugs, alcohol or a volatile substance
- homelessness, or
- family violence within the meaning of the Family Violence Protection Act 2008

You must provide evidence (e.g. letter, report, statement etc) from one of the following parties to support your application.

- 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 your practitioner or case worker should include the following information

- 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:
 - a) whether you were suffering from the relevant condition or circumstances at the time the offence was committed, and
 - b) whether, in the opinion of the practitioner/case worker, it is more likely than not that you could not understand or control your actions that constituted the offence.

Note: A Centrelink Medical Certificate on its own may not be adequate as it does not provide the above requirements

4) Mistaken Identity

Please provide the reason why you believe there has been a case of mistaken identity (including evidence e.g. copy of your driver's licence, in support)

5) Person Unaware of the Fine

An application made on the ground of 'person unaware' must:

- Be made within 14 days of you becoming aware of the infringement notice (You may provide the date you became aware of the infringement notice by completing 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.

Applications please note:

- If sufficient information is not provided you may be requested to provide further information. If you do not provide this further information within 28 days of the date of request your application may be determined in its absence.
- You will be notified in writing of the outcome of this review.
- It is an offence to provide false or misleading information in any written statement required under the Infringements Act 2006.

CONSENT FOR INTERNAL REVIEW TO BE COMPLETED IF ANOTHER PERSON IS ACTING ON YOUR BEHALF

I, of
give my consent to of
to apply for an Internal Review on my behalf in relation to

Signed (person named on the infringement)

Date

Signed (other person with consent)

Date

HOW TO SUBMIT



EMAIL

Scan completed form and supporting documents and send to mrcc@mildura.vic.gov.au



MAIL

Mildura Rural City Council
PO Box 105
Mildura VIC 3502



IN PERSON

A Customer Service Centre:
76 Deakin Ave, Mildura
108 Madden Avenue, Mildura
79 Oke Street, Ouyen

Name:

Signature:

Manager Civic Compliance

Name:

Signature:

Local Laws Coordinator

OFFICE USE ONLY

DECISION			
<input type="checkbox"/>	<i>Withdraw Notice</i>	<input type="checkbox"/>	<i>Confirm</i>
<input type="checkbox"/>	<i>Official Warning</i>	<input type="checkbox"/>	<i>Withdraw – Issue Summons</i>
<input type="checkbox"/>		<input type="checkbox"/>	<i>Request supporting material</i>