



Infringements Act 2006

Application to Pay Infringement amount by Payment Plan or Extension of Time

Applicant details:

Name: _____

Postal Address: _____

Email: _____

Telephone: _____

Pensioner or Health Care Card Number: _____

Infringement Type:

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Parking | <input type="checkbox"/> Litter | <input type="checkbox"/> Livestock |
| <input type="checkbox"/> Fire Prevention | <input type="checkbox"/> Animal | <input type="checkbox"/> Building |
| <input type="checkbox"/> Local Laws | <input type="checkbox"/> Other (Please Specify) | |

Infringement Details:

Infringement Number(s): _____

Infringement Date(s): _____

Due Date(s): _____

Car Registration (if applicable): _____

Type of Request:

Payment Plan

→ Fortnightly Payments of the amount of \$ _____

OR

→ Weekly Payments of the amount of \$ _____

OR

Extension of Time

→ Proposed New Due Date: _____

Please provide a brief explanation why you would like to be considered for this application:

Acknowledgement:

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge.
 - If my request is approved I am committed to making the payments.
 - If I fail to make the agreed payments, my payment plan will default and I will be required to pay the full amount within 7 days. Failure to pay the infringement may lead to the Magistrate’s Court
- By Marking this checkbox I confirm that I have read and understood all the statements above

Signature:

Date:

Return completed form to:

Moyne Shire Council
Po Box 51
Port Fairy VIC 3284

The information requested on this form will be used solely by the Moyne Shire Council. We will not use your personal information for any other purpose without first seeking your consent, unless authorized or required by law. The Council may not be able to process your request unless sufficient information is given. You may apply to the Moyne Shire Council for access to and/or amendment of the information on 5568 0555.