



# Infringement Act 2006

## Application to Review Infringement

### Applicant details:

Name:

Business Name:

Address:

Postal Address (if different to above):

Email:

Telephone:

Mobile:

### 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:

Date of Offence:

Car Registration (if applicable):

### Reason for Review:

- |  |  |
|--|--|
| <input type="checkbox"/> Contrary to Law       | <input type="checkbox"/> Mistake of identity       |
| <input type="checkbox"/> Special Circumstances | <input type="checkbox"/> Exceptional Circumstances |

The following reasons may be appropriate for review:

**Contrary to Law:** This infringement has not been issued in accordance with the relevant regulation.

**Mistake of identity:** The person to whom the infringement was issued to is not the alleged offender. Please provide a Statutory Declaration stating the offender name.

**Special Circumstances:** In relation to a person means:

-a mental or intellectual disability, disorder, disease or illness where the disability, disorder, disease or illness results in the person being unable to understand that conduct constitutes an offence; or to control conduct that constitutes an offence; or

- a serious addiction to drugs, alcohol or a volatile substance within the meaning of section 57 of the Drugs, Poisons and *Controlled substances Act 1981* where the serious addiction results in the person being unable to understand that conduct constitutes an offence; or to control conduct that constitutes an offence; or
- Homelessness determined in accordance with the prescribed criteria (if any) where the homelessness results in the person being unable to control conduct which constitutes an offence.

**Exceptional Circumstances:** The circumstances under which this infringement was issued should be excused having regard to any exceptional circumstances relating to this offence.

Please list in detail your reason for consideration and provide and supporting evidence.

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**Acknowledgement:**

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge.
- This application forms a legal document and penalties exist for providing false or misleading information.
- Agency Name may refuse this application if it becomes evident that any information or supporting documents provided are incomplete or false.

By Marking this checkbox I confirm that I have read and understood all the statements above

Name of person completing this Application:

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Signature:

Date:

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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.