Infringement Notice Instalment Plan Application Form

Privacy Notice: Council is collecting the personal information you supply on this form for the purpose of processing your application. Council is authorised to do this under section 23 of the *State Penalties Enforcement Act 1999*. Council deals with your personal information in accordance with law, including the *Information Privacy Act 2009*.



This form is to be completed when requesting an instalment plan to pay an individual infringement valued at \$200.00 or more. An initial payment of \$60.00 must be made with this application. A separate application is required for each infringement. Please refer to the <u>Infringement Notice Policy</u> on Council's website for further information.

| P: 07 4932 9000 E: enquiries | @rrc.qld.gov.au W: rockhamp | tonregion.qld.gov.au PO Bo | ox 1860, Rockhampton 4700 | ABN: 59 923 523 766 |
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| Applicant Details (the applicant must be the person named on the infringement notice) | | | | | | | | | | |
|--|--------------------------|------|--------|-----------------|--|--------------------|--|--|--|--|
| Applicant nar (if partnership or | | | | | | | | | | |
| Applicant nar (if individual) | ne: | | | | | | | | | |
| | First | | | Middle | | Last | | | | |
| Date of birth: | | | | | | | | | | |
| Preferred cor | eferred contact number: | | Email: | | | | | | | |
| Contact person name: (if partnership or company) | | | | | | | | | | |
| Residential/Business Address | | | | | | | | | | |
| Street numbe | er and name: | | | | | | | | | |
| Suburb: | | | | State: | | Postcode: | | | | |
| Postal address (if different): | | | | | | | | | | |
| Proof of ID (ID may include a passport, drivers licence or Australian proof of age card. A copy must be provided at time of lodgement.) | | | | | | | | | | |
| ID type: | ID number: | | | Expiry date: | | | | | | |
| Offence Details | | | | | | | | | | |
| Infringement notice number: | | | I | Issue date: | | | | | | |
| Declaration | | | | | | | | | | |
| I declare that the details are correct to the best of my knowledge and understand that the instalment plan and future payments will be managed by the State Penalties Enforcement Registry. | | | | | | | | | | |
| Name: | Signature: | | | Date: | | | | | | |
| Payment Information | | | | | | | | | | |
| In person You can pay at Council's Customer Service Centres: 232 Bolsover Street, Rockhampton; 32 Hall Street, Mount Morgan; 1 Ranger Street, Gracemere. By phone Customer Service staff will contact you regarding payment via credit card or debit once this form is received. By post Make your cheques/money order payable to 'Rockhampton Regional Council' and send to PO Box 1860, Rockhampton, Queensland, 4700. | | | | | | | | | | |
| Additional Information | | | | | | | | | | |
| This application is to be accompanied by the first instalment of \$60.00. After making this application, an instalment plan payment notice will be sent to you by the State Penalties Enforcement Registry (SPER). Upon receiving the payment notice, all future payments are to be made to SPER. Failure to comply with the instalment plan will result in enforcement by SPER and you will be required to pay additional fees. | | | | | | | | | | |
| | | | | | | | | | | |
| OFFICE USE ONLY | Date: Amount: \$60.00 | CSO: | | Receipt number: | | necked: 🗌 Yes 🗌 No | | | | |