



# Infringement Appeal Application

<b>Infringement details</b>		
Type of Infringement (please tick)		
Parking: <input type="checkbox"/>	Animal <input type="checkbox"/>	Police <input type="checkbox"/> Litter <input type="checkbox"/> Local Laws: <input type="checkbox"/>
Infringement number:	Date of offence:	Registration number: (if applicable)

**PLEASE PRINT**

Full Given Names.....  
**(as per Drivers Licence)**

Surname: .....

Mailing Address:

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.....Postcode: .....

.....Phone No: .....

**REASON FOR APPEAL**.....

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**I certify that the above information is correct.**

Signature.....date.....

**Privacy Statement:** The personal information collected on this form will be used solely for the primary purpose or directly related purpose as indicated on this form. The applicant understands the personal information provided is for this purpose and that they apply to Council for access and/or amendment of the information.