## Pensioner Rate Remission (PCC) 2024/2025 Application

Local Government (Rates and Charges Remissions) Act 1993

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| Name  | Pension No. Date of Gran |       |      |       | f Grant | Name No.<br>(Property & Rating) |                |     |            |            |      |        |     |  |
|---|--------------------------|-------|------|-------|---------|---------------------------------|----------------|-----|------------|------------|------|--------|-----|--|
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| Dranasti, Addrana   | l                        |       | l    | 1     | ı       |                                 |                |     | Des        |            | la . |        |     |  |
| Property Address Property No.   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Phone No.   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Date of Birth   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Were you the owner and wholly liable for the rates on the above property as at 1 July 2024?   |                          |       |      |       |         |                                 |                |     | aτ         | Yes ☐ No ☐ |      |        |     |  |
| Was this your principal place of residence as at 1 July 2024  |                          |       |      |       |         |                                 |                |     | Yes ☐ No ☐ |            |      |        |     |  |
| (If Occupier, Statutory Declaration Form to be completed)  If no to above, were you the Life Tenant and wholly liable for rates on the above address as at 1 July 2024?  (If Yes, copy of Life Tenancy Agreement must be attached to this form)   |                          |       |      |       |         |                                 |                | ove | Yes 🗌 No 🗌 |            |      |        |     |  |
| Did you possess a Pensione  | er Conc                  | essio | n ca | rd as | s at    | 1 Jul                           | v 20           | 24? |            |            |      | Yes No |     |  |
| Were you in Australia on 1 July 2024?   |                          |       |      |       |         |                                 |                | Ye  | _          | No 🗌       |      |        |     |  |
| This application is subject to approval by Department of Treasury and Finance. If on investigation it is revealed you were not entitled to receive the remission you will be notified and required to repay the amount of the remission. You may provide the Council with further information if you believe the grounds for refusal were incorrect. If your claim is still refused you may formally object to the State Revenue Office, if this is unsuccessful you have the right to appeal to the Magistrates Courts for the objection to be reviewed.  If you lose your entitlement to a Centrelink Pensioner Concession card, Health Care card or Veterans' Affairs gold card endorsed TPI or War Widow/er; or are no longer living at the property at 1 July of any financial year you are required to notify the Council If you fail to notify the Council of such changes or if |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| financial year you are required to notify the Council. If you fail to notify the Council of such changes, or if you make a false and misleading statement, the Commissioner of State Revenue may impose a fine.   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| You should also note that if you are out of the country temporarily, as at 1 July in a particular year, you will be required to reapply for a rate remission in the following year.   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Office Use Only   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Request for reprint of notice File No.  |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
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| Voucher Book No. Doc. No.   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |
| Action Officer:   |                          |       |      |       |         |                                 | Date Received: |     |            |            |      |        |     |  |
| K Summers   |                          |       |      |       |         |                                 |                |     |            |            |      |        |     |  |



## **Declaration**

I (customer name) authorise:

- the City of Launceston (the council) and the Department of Treasury and Finance (Treasury) to use Centrelink
  Confirmation eServices to perform a Centrelink/DVA enquiry of my Centrelink or Department of Veterans' Affairs
  customer details and concession card status to enable the council and Treasury to determine if I qualify for a
  concession, rebate or service.
- Services Australia (the agency) to provide the results of that enquiry to the council and Treasury.

## I understand that:

- the agency will disclose personal information to the council and Treasury including my name/address/payment type/payment status and concession card type status to confirm my eligibility for a rates remission;
- this consent, once signed, remains valid while I am a customer of the council unless I withdraw it by contacting
  the council or the agency. I can get proof of my circumstances/details from the agency and provide it to council
  and Treasury so my eligibility for a rates remission can be determined;
- If I withdraw my consent or do not alternatively provide proof of my circumstances/details, I may not be eligible for the rates remission provided by the council and Treasury.

| Date | 1 | 1 | Applicant's Signature       |  |
|------|---|---|-----------------------------|--|
| Date | 1 | 1 | Council Officer's Signature |  |

By signing this application, you are certifying that the information supplied is true and correct to the best of your knowledge.

## **Personal Information Protection Statement**

As required under the Personal Information Protection Act 2004

- 1. Personal information is managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates, on request to Launceston City Council.
- 2. Information can be used for other purposes permitted by the Local Government Act 1993 and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents or contractors of Launceston City Council, in accordance with Council's Personal Information Protection Policy (17-Plx-005).
- 3. Failure to provide this information may result in your application not being able to be accepted or processed.