



**Please return this completed form to:**  
 22 Nolan Street, Maryborough VIC 3465  
 PO Box 194, Maryborough VIC 3465  
 Tel: 03 5461 0610 | Fax: 03 5461 0666  
 Email: [mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au)

# Application for Internal Review

1. Please complete all sections below to have your infringement reviewed using black/ blue pen only with signature.
2. Only one internal review may be submitted per infringement notice.

Applicant Details			
<b>Who is applying?</b> (confirm who is making the application)	Person named on the infringement <input type="checkbox"/>	Other person with consent – complete <input type="checkbox"/>	'Consent for Internal Review' <input type="checkbox"/>
	Authorised company representative <input type="checkbox"/>		
Your Personal Details			
<b>Full Name</b>			
<b>Corporate name and ACN (if applicable)</b>			
<b>Postal/ Corporate Address</b> (Outcome will be sent here)		<b>State</b>	<b>Postcode</b>
<b>Email</b>			
<b>Phone Number</b>			
Infringement Details			
<b>Parking Infringement Notice Number</b>			
Grounds For Application			
Descriptions are located below, you must select ONE ground for this application.			
<b>Exceptional Circumstances</b> (Description 1) <input type="checkbox"/>	<b>Contrary to Law</b> (Description 2) <input type="checkbox"/>	<b>Special Circumstances</b> (Description 3) <input type="checkbox"/>	
<b>Mistaken Identity</b> (Description 4) <input type="checkbox"/>	<b>Person Unaware of Fine</b> (Description 5) <input type="checkbox"/>	<b>Penalty Reminder Notice Fee Waiver Request</b> (Description 6) <input type="checkbox"/>	
<b>I have attached an explanation of my circumstances and ground(s) in support of my application</b>			<input type="checkbox"/>
<p>I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s.22 (2) of the Infringements Act 2006.</p> <p>I declare that the information that I have supplied in this form, and any attachments to this form, are true and correct to the best of my knowledge.</p> <p>I understand that by making a false or misleading statement in support of this claim, I may be prosecuted.</p>			
<b>Signature of Applicant</b>			
<b>Date:</b>			
<p><b>Privacy Collection Statement:</b>          The collection and handling of personal information will be conducted in accordance with Council's Privacy Policy which is displayed on Council's website and is available for inspection at Council's customer service centre. Please refer to the Privacy Policy for further information.</p>			

Description of relevant grounds for internal review	
1	<b>Exceptional Circumstances</b> Please provide details of the exceptional circumstances (where you have committed the offence due to unforeseen or unpreventable circumstances, e.g. medical emergencies).
2	<b>Contrary to Law</b> Please provide the reasons why you consider the decision to issue you with an Infringement was contrary to law. For example, this ground can be used if you believe that the infringement notice is not valid, or that an infringement officer has acted unlawfully or beyond their authority in taking that action or decision.
3	<b>Special Circumstances</b> Special circumstances includes: <ul style="list-style-type: none"> <li>• a mental or intellectual disability, disorder, disease or illness</li> <li>• a serious addiction to drugs, alcohol or volatile substance</li> <li>• homelessness</li> <li>• family violence within the meaning of the Family Violence Protection Act 2008, or</li> <li>• a severe disabling long-term circumstance or condition making it impracticable to deal with the fine in any way.</li> </ul> You must provide evidence (for example a letter, report, or statement) from one of the following to support your application: <ul style="list-style-type: none"> <li>• a case worker, case manager or social worker</li> <li>• a general practitioner, psychiatrist or psychologist, or</li> <li>• an accredited drug treatment agency.</li> </ul> Evidence from practitioner or case worker should include the following information: <ul style="list-style-type: none"> <li>• the practitioner/case worker's qualification and relationship with you, including the period of engagement</li> <li>• the nature, severity and duration of your condition or your circumstances</li> <li>• whether, in the opinion of the practitioner/case worker, your condition/circumstances:                a) contributed to a significantly reduced capacity to understand or control the conduct constituting the offence, or                b) make it impracticable to deal with your fine.</li> </ul>
4	<b>Mistaken Identity</b> Please provide an explanation of why you rely on the ground of mistake of identity (including evidence e.g. copy of your driver's licence, in support). You cannot request a review under this ground if someone else was driving your vehicle. Failing to nominate the responsible person is not a valid reason to apply for mistake of identity.
5	<b>Person Unaware of Fine</b> An application made on the ground of 'person unaware' must: <ul style="list-style-type: none"> <li>• be made within 14 days of you becoming aware of the infringement notice (You may evidence the date that you became aware of the infringement notice by executing a statutory declaration)</li> <li>• state the grounds on which the decision should be reviewed, and</li> <li>• provide your current address for service</li> </ul>
6	<b>Penalty Reminder Notice Fee Waiver Request</b> Please provide the reason(s) why you believe the Penalty Reminder Notice Fee should be waived. Note: The original penalty amount is still applicable under this request.
<b>Applicants please note:</b> If you do not provide sufficient information, the enforcement agency may request further information. If you do not provide this further information within 21 days of the date of request, the enforcement agency may determine the application without further information. Internal reviews are not permitted for an alleged drink- driving, driving under the influence of drugs, or excessive speed infringements that result in a loss of licence.	

Consent for Internal Review	
To be completed if another person is acting on your behalf. I (person named in the infringement)	
..... of (address of person named on the infringement)	
....., give my consent to (name of person making the application on your behalf)	
....., to apply for an Internal Review on my behalf to Infringement Number	
Signature of person named on the infringement	Date
Signature of the person with consent	Date