Pensioner Application – Rates Remission



Applicant De	etails						
Owner 1 – Full Name:							
Postal Address:							
Suburb:			State:	Postcode:			
Phone Numb	Email Addr	Email Address:					
Marital Status:							
Pensioner Card Number: Card Effective Date:							
Owner 2 – Full Name:							
Postal Address:							
Suburb:			State:		Postcode:		
Phone Number:			Email Addr	lress:			
Marital Status:							
Pensioner Card Number: Card Effective Date:							
Panajan/Pranarty Dataila Blagga tiek							
Pension/Property Details – Please tick Property Address:							
Pensioner Concession Card:							
Repatriation Health Card – For all Conditions (Gold Card): Office Use Only: Copy of Card attached & address verified							
Is this property your principal place of residence?							
If you were not living at this property on 1 July this financial year, when did you move in?							
Is this a full or part Pension?							
Are you wholly liable for payment rates on the above property? Yes \(\subseteq No \(\subseteq \)) 🔲
If no, please supply details of other property owners and state their interest in the property: (e.g. AB SMITH – BROTHER – 1/3 SHARE)							
Declaration							
Declaration This consent will be used for the sole purpose of authorising Centrelink to provide information to Lockyer Valley Regional Council to assess your eligibility in relation to concessions or services provided by the Lockyer Valley Regional Council. Declaration – I authorise Centrelink to confirm with Lockyer Valley Regional Council the current status of my Commonwealth							
Benefit and other details as they pertain to my concessional entitlement. This involves electronically matching details I have provided to the Participant with Centrelink or Department of Veterans' Affairs (DVA) records to confirm whether or not I am currently receiving a Centrelink or DVA benefit.							
I understand that this consent once signed, is effective only for the period I am a ratepayer of the Lockyer Valley Regional Council. I							
understand that if I withdraw my consent, I may not be eligible for the concession provided by the Lockyer Valley Regional Council. Signature: Date:							
OFFICE USE	ONLY						
Date Effective:	Property ID:	Government Subsidy %:	Council Subsidy%:	State Fir Subsidy			ficer me:
			22.22.23 70.	- Jacolay			-
Owner 1 Name ID:			Owner 2 Name ID:				

Privacy Notice

These details will only be used for the purpose for which they have been collected and will not be used for any other purpose. We will not disclose the information you provide outside of Lockyer Valley Regional Council unless we are required by law or you have given your consent. To the fullest extent allowed by law Lockyer Valley Regional Council, its officers and employees will not be liable for any claims in respect of any loss arising out of, or in connection with, the use of any of the supplied information.