

Rates Remission Dwelling Affected by Natural Disaster

This application is made under Council's Policy on Remission of Rates for Land Occupied by a Dwelling that is Affected by Natural Disaster (Policy on reverse).

1. Applicant Details

Ratepayer Name:	Contact Person:	
Contact Postal Address:		
Telephone:	Email:	
2. Rating Unit Inform	ation	
Valuation Number:		
Property Location:		
Date of Natural Disaster:		
Nature of Natural Disaster (e.g.	rosion, falling debris etc):	
Were dwellings or buildings ma	de uninhabitable as a result of the disaster? (<i>tick one</i>) [] Yes	No If no, you are not eligible under the policy
Was the rating unit your principa	I place of residence immediately prior to the disaster: (tick one)	Yes No If no, you are not eligible under the policy
Is your land in a known hazard p	rone location? (<i>tick one</i>) Yes No	
Ratepayer Comment: Please cor services such as water, or sewer	nment whether any part of the buildings or land remains habitab age were affected, etc.	ble or available for use, whether essential
Note: Please advise Council the	date you've moved back into the dwelling (if applicable).	
Signed:	Name:	Date: