

Claim for inclusion on the roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Murrumbidgee Council

## Form for individual owners, occupiers and ratepaying lessees

Instructions: This form must be received by the General Manager of Murrumbidgee Council by 6:00pm (EST) Monday 26 July 2021.

By post: PO Box 96, Jerilderie NSW 2716 By hand: 35 Jerilderie Street, Jerilderie; 21 Carrington Street, Darlington Point; 39 Brolga Place, Coleambally By email: mail@murrumbidgee.nsw.gov.au

**Do not** use this form if you need to nominate an elector.

Use instead Form for nomination of an elector by joint/several, corporate or trustee owners, occupiers or ratepaying lessees.

<u>Note</u>: A person may not be enrolled more than once for the same ward. A person who is qualified for enrolment in more than one ward in a Council area may only be enrolled in the ward in which the person is qualified as a resident. If the person is not a resident, they may be enrolled in the ward specified in a notice by the person to the Council's general manager before the closing date for the election, or if no such notice is given, a ward chosen by the general manager. Overall a person cannot vote more than once is any Local Government Area.

Section 1 –	Property details					
Lot #:	DP/SP#:	For ratepaying I	essees <u>only</u> – Rates a	ssessment number:		
Suite/Level/Uni	it/Street Number & S	Street Name:				
Town/Suburb:			State:	Postcode:		
Council & Ward	d					
Section 2 -	- Claimant's deta	ils				
Surname:		Given name	e(s):			
Date of birth: _	//					
Residential add	dress					
Phone number:	Phone number: Email address:					
Postal address	(If different to resid	ential) :				
I am the (tick o	ne): 🗌 Owner	Ratepaying Lessee	Occupier of the p	property described in Section 1.		
For occupiers	only - Date our oc	cupancy expires:/	_/			
For ratepaying	<b>g lessees <u>only</u> –</b> Da	ate until which we are liable to	pay rates:/	_/		
	enrol and claim the sees for Murrumbidg		roll of non-resident ow	ners of rateable land or the roll of occupiers and		
in				ward (insert ward name, if applicable)		

PLEASE COMPLETE BOTH SIDES OF THIS FORM

I am already enrolled in this or another ward (if any) of Murrumbidgee Council	
(tick one): Yes No	
Claimant's signature	_ Date//
Section 3 – Statement by witness	
I am of or above the age of 18 years. I saw the claimant sign this claim, and believe, to the best of my kn the claim are true.	owledge that the statements in

Witness surname:	Witness given name(s):			
Witness signature:		Date	_/	/

OFFICE USE ONLY								
Date received//	Received by:							
Processed date//	Processed by:							
Claim allowed? Yes	No Elector informed of outcome? Yes	🗌 No	Date//					