

Organisation:

APPLICATION FOR RATES EXEMPTION

Section 6.26 of the Local Government Act 1995

Privacy

The personal information collected on this form will only be used by the Town of Port Hedland for the sole purpose of providing requested and related services. Information will be stored securely by the Town and will not be disclosed to any third parties without your express written consent.

Instructions: Please print clearly in the spaces provided and fill out the attached checklist.

This application form is to be used by organisations seeking a rates exemption, pursuant to Section 6.26 of the *Local Government Act 1995*. The provision of this exemption will result in a decision to be prepared, and you will be advised of the outcome in due course. Please attach any additional documents requested, as failure to do so may result in the application being refused.

1. PROPERTY OWNER DETAILS

Property Owner:	
Property Address:	
Telephone:	Postcode:
Mobile:	Facsimile:
Email:	
2. APPLICANT DI	TAII S
	TAILS
Contact Person:	
Position Title:	
Postal Address:	
Telephone:	Postcode:
Mobile:	Facsimile:
Fmail:	

3. PLEASE ANSWER THE FOLLOWING QUESTIONS BY TICKING THE APPROPRIATE BOX

YES NO	
	Are you the owner or lessee and occupier of the land with the rate notice being issued in the organisation's name?
	Is your organisation an Incorporated body? If so, please provide the certificate of incorporation.
	Is your organisation considered not for profit?
	Is the organisation considered a Public Benevolent Institution for taxation purposes? If so, please provide the relevant Taxation information.



APPLICATION FOR RATES EXEMPTION

Section 6.26 of the Local Government Act 1995

ſ	$\neg \Box$		oes the organisation own or lease the rateable land? (If leased, is the lessee				
L			onsible for rates under the lease agreement)?, please provide a certificate of the lease.				
[than	e organisation exempt from the payment of rate the Local Government Act? , please provide details of the specific Legislati	_			
	4. DOCUMENT REQUIREMENTS Please provide a copy of (in addition to those specified in Section 3):						
		Organisation's Constitution					
		includ •	en statement, outlining the nature of the organisule the following details: Use and occupancy of the property Type of service provided (e.g. food, accommon frequency of service provision (e.g. full-time, Whether payment is received for the service	odation etc)			
	Floor plan of the leased property area, if only part of the property is t						
			er statements for the				
 5. AUTHORISATION By signing this application, I hereby certify that the information provided is true and correct to the best of my knowledge. I understand that Applications must be submitted by 31 March of any year to be considered for the next two financial years. Applications lodged after this date may be considered for the second financial year only. Organisations who are granted rates exemption by Council will be asked to reapply every financial year, if Council considers this appropriate. I have read and understand the Town's Rates Exemption Policy. 							
[Name:						
	Position:						
}	Organisa	ation:	1	I B. ()			
	Signed:			Date:			