



PRIVATE AND CONFIDENTIAL

Application for Rate Assistance for Non-Profit Organisation Ratepayers

All sections must be fully completed.

Please Return to:

**The Chief Executive Officer
Mackay Regional Council
PO Box 41
MACKAY QLD 4740**

Property Owners

Enter full name/s of the register owner/s of property.

APPLICANTS

Organisation Name: _____

Gross Annual Income: _____

Please attach written proof of your income/s e.g. Profit and Loss Statement.

Property Details

Rate Assessment Number as shown on the current Rate Notice _____

Address of property: _____

_____ Post Code: _____

Contact Details

Postal Address: _____

_____ Post Code: _____

(If same as Property Address write "as above")

Telephone (include area code)

Business () Private ()

Assets

PRESENT ASSETS OF APPLICANTS		AMOUNT/VALUE
CASH ON HAND		\$
SAVINGS or CHEQUE ACCOUNTS (e.g. Bank, Building Society, Credit Union, Please specify)	<u>Details</u>	
REAL ESTATE		
INVESTMENTS (eg Bonds, Shares, etc)		
OTHER		

Liabilities/Debts

Background

Please explain the changes in circumstances that have affected your ability to meet your rate commitments (e.g. decline in your income).

Level of assistance sought:

Waiving of Interest while a payment schedule is maintained to clear all rates within 2 years.

Previous Assistance

Have you ever applied for Rate Assistance Before? YES NO

If Yes, when? / / What assistance was provided? _____

PRIVACY DISCLAIMER

Mackay Regional Council is collecting your personal information in order to process your application. This information will only be disclosed to any other third party with your written authorisation or as we are required to by law

STATUTORY DECLARATION

I/We _____

Of _____

In the State of Queensland, do solemnly and sincerely declare all the answers to be true and correct and I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the "Oaths Act of 1867".

I hereby undertake to accept the procedures and the rulings of the Independent Rate Relief Tribunal and that the decisions of the Independent Rate Relief Tribunal are not subject to appeal.

TAKEN AND DECLARED

AT _____) _____

Signature

DAY OF _____ 20 ___) _____

Signature

BEFORE ME _____) _____

Justice of the Peace

Signature

This application should be forwarded to:

The Chief Executive Officer

Mackay Regional Council

(PO Box 41

MACKAY QLD 4740)

Mark your envelope

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