T 1300 79 49 29
F (07) 4197 4455
E enquiry@frasercoast.qld.gov.au
www.frasercoast.qld.gov.au

Return Information:
Fax: 07 4197 4455 **Post: PO Box 1943, Hervey Bay** **In Person: Council Administration Centres**

Application for Pensioner Concession on Rates

Purpose of Form: *This form will be used to process your request for pensioner concession on rates.*

***Denotes a Mandatory field**

PROPERTY NUMBER:				
PROPERTY LEGAL DESCRIPTION:	**Lot**		**Plan**	

***NAME OF APPLICANT/S:**	
***PROPERTY ADDRESS:**	
***POSTAL ADDRESS:**	
***TELEPHONE NO:**	
MOBILE:	
EMAIL:	

*Is the applicant the holder of a Pension Concession Card? ☐ YES ☐ NO

Pension Concession Card No./s		
	Male	**Female**

*Is the applicant the holder of a Veteran Affairs Entitlement Card? ☐ YES ☐ NO

Veteran Affairs Card No./s		
	Male	**Female**

N.B. THE ABOVE CARDS MUST BE PRESENTED WITH THIS APPLICATION

Marital Status
Please Tick
☐ Married ☐ Single ☐ Widow ☐ Widower ☐ Divorced ☐ De-Facto

*Will applicant reside on abovementioned property and be the applicant's principal place of residence?

☐ YES ☐ NO

Date of Effect Requested:

Please note: The EFFECTIVE DATE of entitlement may be different from the date requested

DECLARATION

This consent will be used for the sole purpose of authorising Centrelink to provide information to Fraser Coast Regional Council to assess your eligibility in relation to concessions or services provided by Fraser Coast Regional Council:

Customer Confirmation

I/we _____ authorise Centrelink to confirm with Fraser Coast 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 Fraser Coast Regional Council 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 Fraser Coast Regional Council. I also understand that this consent, which is ongoing, can be revoked any time by giving notice to Fraser Coast Regional Council.

I understand that if I withdraw my consent, I may not be eligible for the concession provided by Fraser Coast Regional Council.

A brochure is available from Centrelink that provides more details about the Centrelink Confirmation eServices or on Centrelink's website at www.centrelink.gov.au.

Signed and declared this _____ day of _____ 20___ in the presence of:-

_____ _____

(Witnessed by JP or FCRC Staff) **(SIGNATURE OF APPLICANT/S)**

I hereby certify that I have sighted the above
Pension Concession Card or Veteran Affairs Entitlement Card/s.

Privacy Notice: In using this form you are providing personal information such as name and contact details. This information will be used only for the purpose stated above and will only be accessed by persons who have been authorised to do so. Your personal information is handled in accordance with the *Information Privacy Act 2009*. **More ...**

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FRASER COAST REGIONAL COUNCIL

CONDITIONS OF RATE REMISSIONS - COUNCIL AND STATE GOVERNMENT

1. All applicants to be the holder of a Queensland 'Pensioner Concession Card' issued by Centrelink, on behalf of the Department of Family and Community Services, or the Department of Veterans' Affairs, or a Queensland 'Repatriation Health Card - For All Conditions' (Gold Card) issued by the Department of Veterans' Affairs; and is the owner, either solely or jointly of property which is his/her principle place of residence or occupies their principle place of residence under life tenancy.
2. THE ABOVE CARDS MUST BE PRESENTED WHEN THIS APPLICATION IS LODGED.
3. The address displayed on the Queensland Pensioner Concession card **must be** the address for which pension rebates are being claimed. In the case of Veteran Affairs cards, proof of address i.e. Drivers licence should be presented.
4. **If a P.O. Box is displayed as the address**, a Statutory Declaration must accompany the application stating that property claiming rebates for is principle place of residence.
5. Application must be made in writing on the prescribed form.

APPLICATIONS MUST BE LODGED PRIOR TO THE ANNUAL RATES

FOR OFFICE USE ONLY

Particulars checked by: _____ Date: _____

Code: _____ Centrelink Online Confirmation Date: _____

Remission Granted: ☐ YES ☐ NO

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