



About this form

You may use this form if you dispute a rate category or service on your notice and request a review of the charges levied.

How to complete this form:

1. Ensure that all fields have been filled out correctly.
2. Once completed you can submit this form by email, facsimile, mail and in person. Please refer to the Lodgement details section for further information.

Applicant Details: (Please note Communication details may be used to update Council's records)

Applicants Full Name:					
Address:					
Locality / Suburb:		State:		Postcode:	
Contact Numbers:	Mobile:		Landline:		
Email Address:					
Assessment Number :					
Property Address :					

Details of Rate Category or Service you wish to dispute on your notice:

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Authorisation:

I/We agree to the following:

That the information provided herein is true and correct in every particular and that all-material facts have been disclosed to Longreach Regional Council. Please allow 7-10 working days from the date of receipt of your application. Ratepayers may be required to provide proof of payment or supporting documentation to enable Council to process your transfer request, unless all properties are owned by the same owner.

Signature(s):	Date:
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Lodgement of your request:

Mail:	Longreach Regional Council, Po Box 144 Ilfracombe QLD 4727	In Person:	Longreach Regional Council, 96A Eagle Street, Longreach QLD 4730
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OFFICE USE ONLY:

Assessment		O/S Balance \$		as at:	___/___/___
Agreement	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		EM Signed:		
Reason if not approved:					
Date adjustment made:		Officer Signed:			