

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

Form for individual owners, occupiers and ratepaying lessees

Instructions: This form must be received by the general manager of: Cumberland Council

by 6:00pm (EST) Monday 25 October 2021.

By post: PO Box 42, MERRYLANDS NSW 2160 By hand: 16 Memorial Avenue, Merrylands NSW 2160

By email: council@cumberland.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.

Note: 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 lessees <u>only</u> – Ratesa	ssessment number:
Suite/Level/Unit/Street Number & Street	Name:	
Town/Suburb:	State:	Postcode:
Council & Ward		
Section 2 – Claimant's details		
Surname:	Given name(s):	
Date of birth: / /		
Residential address		
Postal address (If different to residentia	l):	
I am the (tick one): Owner F	Ratepaying Lessee Occupier of the prop	erty described in Section 1.
For occupiers only – Date our occupa	ncy expires:/	
For ratepaying lessees only – Date u	ntil which we are liable topay rates:/	
I am entitled to enrol and claim the incluratepaying lessees for: Cumberland Co		wners of rateable land or the roll of occupiers and
in		ward (insert ward name, if applicable)
I am already enrolled in this or another	ward (if any) of Cumberland Council	
(tick one): Yes No		
Claimant's signature		Date//
Section 3 – Statement by witnes	ss	
I am of or above the age of 18 years. Is the claim are true.	saw the claimant sign this claim, and believe, t	to the best of my knowledge that the statements in
Witness surname:	Witness given name(s):	
Witness signature:		Date / /



OFFICE USE ONLY									
Date received	1	/Receive	d by:						
Processed date / / Processed by:									
Claim allowed?	Yes	☐ No	Elector informed of outcome?	□ No	Date				