## Application for partial relief from payment of water

Rates and Valuations



Folder 119355 Workflow	Rates	Doc ID	E	Box No	
Use this form to apply for partial	relief from the p	payment of water consumpti	ion charges.		
CUSTOMER DETAILS					
Surname		Given names	Given names		
Postal address			State	Postcode	
Contact number	Email addres	ss			
PROPERTY DETAILS					
Assessment number	Property address				
Property use	Location of w	Location of water loss			
What was the cause of the loss?					
How was the loss detected?					
Date noticed unusually high water consumption		Date plumber was contacted	Date of rep	Date of repair	
DECLARATION					
I/We,truthfully and correctly supplied	by ma/ua	declare that the inf	ormation set fo	orth herein has been	
I/We have attached a licensed F carried out, together with a state due to an unapparent plumbing	Plumber's Acco ement from the		•	•	
Signed			Dated		
LODGEMENT OF VOUR ARRI	ICATION				
LODGEMENT OF YOUR APPL					
MAIL Chief Executive Officer		•			
EMAIL admin@northburnett.c	gld.gov.au	TELEPHONE	1300 MY NE	3RC (1300 696 272)	

Visit our customer administration offices 8.30am – 4.30pm (closed 11.30am – 12.30pm)

IN PERSON