

Claim for inclusion on the 2024 roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Burwood Council.

## Form for nomination of an elector by joint/several, corporate or trustee owners, occupiers or ratepaying lessees

Instructions: This form must be received by the general manager of Burwood Council by 6:00pm (EST) Monday 5 August 2024.

By post: PO Box 240, BURWOOD NSW 1805

By hand: Customer Service Centre at 2 Conder Street, BURWOOD

By email: council@burwood.nsw.gov.au

**Do not** use this form if you are an individual owner, occupier or ratepaying lessee. Use 'Form for individual owners, occupiers and ratepaying lessees'

<u>Note</u>: A person may not be enrolled or vote more than once in a Council area. A person who is qualified for enrolment in more than one ward may only be enrolled in the ward of which they are a resident. If the person is not a resident, they may specify which ward they wish to be enrolled in by giving written notice to the Council's general manager before 5 August 2024. If no such notice is given, a ward will be chosen by the general manager.

Section 1	<ul> <li>Property details</li> </ul>			
Lot #:	DP/SP#:	For <u>ratepaying lessees</u> only – Rates assessment number:		
Suite/Level/Ur	nit/Street Number & Str	eet Name:		
Town/Suburb:	·	State: Postcode:		
Council & Wa	rd (if applicable)			
Section 2	<ul> <li>Details of nomina</li> </ul>	tor/s		
		trustee owners, occupiers or ratepaying lessees nominating the elector. Include full names of BNs and ACNs as appropriate: (If more space is required, attach another page)		
We are the (tie	ck one): Owners	Ratepaying Lessees Occupiers of the property described in Section 1.		
For <u>occupier</u>	<u>s</u> only – Date our occu <sub>l</sub>	pancy expires:/		
For <u>ratepayin</u>	ng lessees only – Date	until which we are liable to pay rates://		
Nominato	r's contact details:			
Surname:		Given name(s):		
Date of birth:	//			
Phone number: Email address:				
Postal addres	s:			
I nominate	minate as an elector for Burwood Council.			
	ward (insert ward name, if a			
I am authorise	ed by the above nomina	tors to make this nomination.		
Nominator's s	ignature	Date / /		

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Section 3 - Nominated elector's details		
Surname: Give	en name(s):	
Date of birth:/		
Phone number:	Email address:	
Residential Address Street Number & Street Name:		
Town/Suburb:		
Postal address (if different to residential:		
I am entitled to enrol and claim the inclusion of my name ratepaying lessees for Burwood Council.	on the roll of non-resident owne	rs of rateable land or the roll of occupiers and
I am already enrolled in this or another ward (if any) of Bo	urwood Council.	
(tick one): Yes No		
Claimant's signature		/Date//
Section 4 – Statement by witness		
I am of or above the age of 18 years. I saw the nominate statements in the claim are true.	d elector sign this claim, and bel	ieve, to the best of my knowledge that the
Witness surname:	Witness given name(s):	
Witness signature:		Date /
	OFFICE USE ONLY	
Date received/ Received by:		
Processed date// Processed by:		
Claim allowed? Yes No Flector info	ormed of outcome?   Yes	No Date / /