

# PENSIONER CONCESSION APPLICATION FORM

Approved by the Director General of the Department of Local Government, in accordance with clause 19 of the Local Government (Rates and Charges) Regulation 1999 under the Local Government Act, 1993.

## APPLICATION FOR A PENSIONER CONCESSION FOR THE WHOLE OR PART OF THE YEAR COMMENCING 1 JULY 200\_\_

Rate Assessment Number:.....

I,.....  
(Full name in block letters)

Of.....NSW.  
(Address, being principal/sole place of residence)

Telephone Number:..... apply for a pensioner concession.

For the purpose of this application, I state that:

(1) I receive the following pension:.....

(2) I **am/am not\*** the holder of a current Pensioner Concession Card (PCC) issued by the Commonwealth Government to N.S.W residents.

**\*Cross out whichever does not apply**

My PCC Number is \_\_\_\_\_ and the grant date of the Card is  
\_\_\_\_/\_\_\_\_/\_\_\_\_. (Please note: DVA Gold Card alone may not provide rebate eligibility)

### COUNCIL MUST SIGHT A CURRENT CONCESSION CARD FOR ALL APPLICATIONS

(3) The dwelling at the above address is owned:

- Solely by me
- By me and / or the following people, all of whom **ARE** eligible for a pensioner concession:

Name: .....

Relationship to Applicant:- .....

PCC No: .....

Name: .....

Relationship to Applicant: .....

PCC No: .....

- By me and / or the following people, all of whom **ARE NOT** eligible for a pensioner concession:

Name:.....

Name:.....

My share in the dwelling is. .... % (Insert share)

(4) The aforementioned property is my principal/sole place of residence.

(5) I **have/have not**\* claimed a pensioner concession on this or another property this year. If you have, please give the address of relevant properties.

.....  
(Address)

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**I hereby declare that the information provided is true and correct. If you make a false statement in an application you may be guilty of an offence and fined up to \$2,200.00.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **CUSTOMER CONSENT**

For the sole purpose of authorising the Council to confirm with Centrelink whether or not the detail I have provided to the council matches Centrelink or other Commonwealth portfolio department or agency records in relation to the current status of my Commonwealth benefit.

I, \_\_\_\_\_ authorise the council to confirm with Centrelink the following details:

- ❖ Customer Reference Number (CRN)
- ❖ Name
- ❖ Address and postcode

That I am a valid concession cardholder

I agree that, unless I revoke my consent, this Customer Consent record is a permanent consent, and may be relied on by council until such time as I revoke it.

I may revoke this Customer Consent record at any time by giving the council written notice that my consent is revoked. I understand if I revoke this consent, I may not be eligible for the concession given by council.

I acknowledge I have read and understood this Customer Consent record.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_