

Concealed Leak Financial Assistance Application

Please complete all questions as the information provided will assist Douglas Shire Council to process your application. The information contained in this form is confidential and will not be used for any purpose other than consideration for assistance.

All questions MUST be answered (if applicable), if there is insufficient space please add additional paper. If you have no information for a question, please indicate "Not Applicable" or "N/A"

SECTION 1 - DETAILS OF APPLICANT

Full Name of Applicant: _____

Date of Birth: _____

Postal Address: _____

Telephone: _____ Mobile: _____

Email: _____

SECTION 2 - PROPERTY DETAILS

Water Assessment number: _____

Property Address: _____

Is this property your Principle Place of residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is property tenanted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, how long have the current tenants been in the property for?	_____

SECTION 3 - APPLICATION FOR LEAK

Date the leak was IDENTIFIED:	<input type="checkbox"/> Self Found <input type="checkbox"/> Informed by Council
Is the current water bill more than 150 kilolitres above your previous notice (if no, this application is not eligible)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you applied for Concealed Leak Financial Assistance from Douglas Shire Council before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, when? And what assistance was provided?	_____
Copy of Licenced Plumber's detailed invoice attached	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 4 - REPAIR DETAILS

Plumber's Name: _____

QBCC Plumber's Licence Number: _____

Date the leak was REPAIRED by licenced plumber: _____

SECTION 4 - REPAIR DETAILS (con't)

Meter Reading at time of Repair	
Was the leak concealed and undetectable by the applicant/owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please provide brief description of water leak	
Please provide specific location of leak within the property	
Plumber's Signature	

SECTION 5 - APPLICANT DECLARATION

Please Note - If this application is not signed by the applicant, and if your statutory Declaration below is not witnessed by an authorised person, this form will be returned to you.

Please note: If Council becomes aware of any ratepayer or individual providing false or misleading information in order to gain assistance for which he or she would otherwise not be eligible, the agreement with Council will become null and void and legal action to recover debt may be taken.

Note 1 A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years – see section 11 of the Statutory Declarations Act 1959.

Note 2 Chapter 2 of the Criminal Code applies to all offences against the Statutory Declarations Act 1959 – see section 5A of the Statutory Declarations Act 1959

Commonwealth of Australia
STATUTORY DECLARATION
Statutory Declarations Act 1959

I,¹ _____,

Of (Address) _____,

in the State of _____,

(Occupation) of _____,

Make the following declaration under the *Statutory Declarations Act 1959*:²

do solemnly and sincerely declare that the information provided in the attached application is a true and correct record of my/our situation.

I Understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

Applicant Signature: _____ Dated: _____

Declared at _____ this _____ day of _____ 20_____.

Before me,

Signature of person before whom the declaration is made:

Full name, qualification, and address of person before whom the declaration is made:

Please note: If Council becomes aware of any ratepayer or individual providing false or misleading information in order to gain assistance for which he or she would otherwise not be eligible, the agreement with Council will become null and void and legal action to recover debt may be taken.

Applicant Signature:		Date:	
----------------------	--	-------	--

Douglas Shire Council – Privacy Collection Notice:

Douglas Shire Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which the council manages personal information is governed by *the Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with the *Local Government Act 2009* so that we can assess and finalise your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our Information Privacy Policy.