

Claim for inclusion on the roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Cootamundra-Gundagai Regional 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 Cootamundra-Gundagai Regional Council by 6:00pm (EST) Monday 5 August 2024.

By post: PO Box 420, Cootamundra NSW 2590

By hand: 81 Wallendoon Street, Cootamundra or 255 Sheridan Street, Gundagai

By email: mail@cgrc.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 -	Property details	
Lot #:	DP/SP#:	For ratepaying lessees only – Rates assessment number:
Suite/Level/Un	it/Street Number & Str	eet Name:
Town/Suburb:		State: Postcode:
Council & War	d (if applicable)	
Section 2 -	- Details of nomina	tor/s
		r trustee owners, occupiers or ratepaying lessees nominating the elector. Include full names of ABNs and ACNs as appropriate: (If more space is required, attach another page)
We are the (tic	k one): Owners	Ratepaying Lessees Occupiers of the property described in Section 1.
For occupiers	only – Date our occu	pancy expires:/
For ratepaying	g lessees only – Date	until which we are liable to pay rates://
Nominator	's contact details:	
Surname:		Given name(s):
Date of birth: _	/	
Phone number	·· ·	Email address:
Postal address	::	
I nominate Council,		as an elector for Cootamundra-Gundagai Regional
in		ward (insert ward name, if applicable).
I am authorised	d by the above nomina	ators to make this nomination.
Nominator's si	nnature	Date / /



Section 3 - Nominated elector's details Surname: _____ Given name(s): _____ Date of birth: ____/___ _____ Email address: _____ Phone number: Residential Address Street Number & Street Name: _____ State: _____ Postcode: ____ Postal address (if different to residential: I am entitled to enrol and claim the inclusion of my name on the roll of non-resident owners of rateable land or the roll of occupiers and ratepaying lessees for Cootamundra-Gundagai Regional Council, ward (insert ward name, if applicable) I am already enrolled in this or another ward (if any) of Cootamundra-Gundagai Regional 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 nominated elector sign this claim, and believe, to the best of my knowledge that the statements in the claim are true. Witness surname: _____ Witness given name(s): _____ Witness signature: ______ Date ___/ ____ **OFFICE USE ONLY** Date received ____/___ Received by: _____ Processed date ____/___ Processed by: _____ ☐ No Elector informed of outcome? Yes