

Application for Internal Review

- Please complete all sections below to have your infringement reviewed.
- 2. Only one Internal Review may be submitted per Infringement Notice.

Applicant details											
Who is applying (confirm who	is making the applicatio	on):									
Person named on the infringement notice	Other person with consent (You must also complete the 'Consent for Internal Review' on reverse side of this page) Authorised company representative										
Your personal details				'							
Full name			Email address								
Corporate name			Phone nu	ımber							
Address of person/Corporate (Outcome of review will be sent to this address)											
		_									
		State	Postco	ode							
Infringement details											
Infringement number											
Grounds for application											
Descriptions are located on the re	everse of this page. You mus	st select one gro	ound for this applic	ation.							
Exceptional Circumstances (See description 1)	Contrary to Law (See description 2)		Circumstances scription 3)	Mistaken Ide (See descript							
Explanation of my circumstar Please attach any relevant supporting											
DI	.,										
Please attach additional pages Declaration details	it required										
I understand that this is the only		ature of Applicant									
 that I am able to submit pursuant to S.22 (2) of the <i>Infringements Act 2006</i>. I declare that the information that I have supplied in this form and any attachments to this form, are true to the best of my knowledge. 											
 I understand that by making a fall of this claim, I may be prosecuted 	support Date										

Description of relevant grounds for internal review

1 Exceptional Circumstances

Please provide details of the exceptional circumstances (where you have committed the offence due to unforeseen or unpreventable circumstances, e.g. medical emergencies).

2 Contrary to Law

Please provide the reasons why you consider the decision to issue you with an Infringement was contrary to law. For example, this ground can be used if you believe that the infringement notice is not valid, or that an infringement officer has acted unlawfully or beyond their authority in taking that action or decision.

3 Special Circumstances

Special circumstances includes:

- o a mental or intellectual disability, disorder, disease or illness
- o a serious addiction to drugs, alcohol or volatile substance
- o homelessness, or
- o family violence within the meaning of the Family Violence Protection Act 2008.
- o circumstances experienced by the person that-
 - (I) Are long-term in nature; and
 - (II) Make it impracticable for the person to pay the infringement penalty and any applicable fees or otherwise deal with the infringement notice
 - (III) Do not solely or predominantly relate to the person's financial circumstances

You must provide evidence (e.g. letter, report, statement) from one of the following parties to support your application.

- o a case worker, case manager or social worker
- o a general practitioner, psychiatrist or psychologist, or
- o an accredited drug treatment agency.

Evidence (e.g. letter, statement or a report) from practitioner or case worker should include the following information:

- o the practitioner/case worker's qualification and relationship with you, including the period of engagement
- \circ the nature, severity and duration of your condition or your circumstances:
 - a) whether you were suffering from the relevant condition or circumstances at the time the offence was committed, and
 - b) whether, in the opinion of the practitioner/case worker, it is more likely than not that your condition/ circumstances resulted in your inability to understand or control the conduct constituting the offence.

The practitioner or agency report must show that because of your condition/circumstances you could not understand or control your conduct constituting the offence.

4 Mistaken Identity

Please provide an explanation of why you rely on the ground of mistake of identity (including evidence e.g. copy of your driver's licence, in support).

Applicants please note:

If you do not provide sufficient information, the enforcement agency may request further information. If you do not provide this further information within 35 days of the date of request, the enforcement agency may determine the application without further information.

Consent for internal review															
To be completed if and I (person named in the	•		·	•									 	 	,
of (address of person give my consent to (na to apply for an Interna Signature of person named	me of pe	erson i	making / behal	the a	pplicat	ion on	your behalf)						 	 	,
Date								Date							