Corporation owner or occupier – Revocation of appointment

Cardinia Shire Council

Date and	time	receive	ed (<i>Office use</i>	e only)
/		/		

State

VIC

Instructions

Please complete all sections and sign the declaration to ensure your application for revocation of appointment can be accepted.

1 Name of Council

Council	name
Council	name

2 Property details

Address of rateable property

3 Corporation details

	-		
Name of corporation			
ACN		Phone number	
Registered address		Postcode	State

Postcode

4 Details of the appointment to be revoked

Given name/s						
Family name						
Date of birth	/	/	/			
Address of principal place of residence						
					Postcode	State
Postal address						
lf different					Postcode	State
Phone number				Email address		

5 Corporation declaration

Details of person sign	ning on behalf of the corpora	ation				
Name						
Position held in corporation						
Phone number		Email address				
I declare that:						
	ake the notice of revocation on behave the notice of revocation on behave the person named in Section 4 as a vo		prporation is to	be revoked.		
Signature			Date	/	/	
For this revocation	to take effect before the	e next council election	n, it must be	e receive	ed by the c	ouncil prior to
the close of the ro	II.					
Council address for lodgement	Mail: PO Box 7, Pakenham VIC 3810 In Person: 20 Siding Ave, Officer VIC 3809					
Email address	elections@cardinia.vic.gov.au					

Privacy Statement: Council is committed to protecting your privacy. Your personal information will be handled in accordance with the Privacy and Data Protection Act 2014. All personal information we collect will only be used in accordance with our Privacy Policy, which is available from our website. For further Information about how we manage and use your personal information or how you can access and/or amend your personal information please contact us via our website or by calling us directly.