

All Communication address to the General Manager
Shellharbour City Council,
Locked Bag 155
Shellharbour City Centre, NSW 2529
p. 02 4221 6111 f. 02 4221 6016
e. records@shellharbour.nsw.gov.au
www.shellharbour.nsw.gov.au

DX 26402 Shellharbour City Centre

APPLICATION FOR FEE REDUCTION

This form is only for use in applications for reduction or waiver of Council fees and charges imposed for use of Dunmore Waste disposal facility

| 1. | Applicant/Organisation: | | | | |
|--------------------------------|-------------------------|--------------------------|---------------------|------------------------------|--|
| Name o | of Organisation: _ | | | | |
| Addres | s: | | | | |
| Telepho | one: | | | | |
| | | | | | |
| Secretary | | Name: | | | |
| Treasurer | | Name: | | | |
| 2. Type of Donation requested: | | | | | |
| | ndicate here if ap | plication is for ongoing | exemption from, o | r reduction in tipping fees: | |
| Amoun | t Requested: \$ | | | | |
| Type of | f waste to be disp | oosed of: | | | |
| Total e | stimated quatity o | of waste to be disposed | of: | | |
| Origin o | of waste to be dis | posed of: | | | |
| Please | list any donation | s given to your organisa | ation by Council, o | ver the last three years: | |
| | AMOUNT | DATE | PURPOSE TO PUT | WHICH FUNDS WERE | |
| | | | | | |
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| 3. Information Regarding to a) What services or activities does | the Organisation es your organisation provide to Shellharbour Residents? |
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| | |
| b) Principal Objectives: describe as stated in your Constitution. | e in broad terms the principal objective of your organisation, |
| | |
| c) What contributions do volunte | ers make to your organisation. |
| | |
| Additional Information Any additional information wh | nich you consider necessary. |
| b) Is there a way your organisation | on acknowledge the Council's donations? |
| 5. Declaration of Non-Prof | it / Registered Charity or Organisation |
| I declare the | is a non-profit |
| (office bearer) | |
| | for the purposes of the Australian Taxation Office. |
| (signed) | (witness) |
| (registration number) | |
| President/Chairperson Signature | :Date: |