

APPLICATION FOR RATE CONCESSION SEPARATE PARTS OR UNITS

UNDER PART 11.8 OF THE LOCAL GOVERNMENT ACT 2019



KATHERINE
TOWN COUNCIL

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General Information

This form can be completed and submitted to apply for a rates concession under section 249 of the Local Government Act 2019 (NT) (**LGA**) where Council has assessed an allotment as divided into separate parts or units that are adapted for separate occupation or use (under s226(5) of the LGA) (the **Unit**).

The Unit has been assessed as a discrete and independent residence on the grounds that it:

- is self-contained and self-sufficient as a residence;
- has no internal access to the other residence of the allotment (unless lockable);
- is separately lockable and accessible to the outside; and
- has running water, toilet and bathing facilities.

You are the landowner (or are authorised by the landowner to make this application) of an allotment (the **Property**) which has been assessed as having the Unit.

If you wish with to apply for a rate concession for more than one separate Unit on your Property, an application for rate concession should be completed for each separate Unit.

PART A - APPLICATION INFORMATION

PROPERTY OWNER: Yes No, please attach written approval from property owner

FAMILY NAME: GIVEN NAMES:

COMPANY NAME: ABN/CAN (if applicable):

POSTAL ADDRESS

UNIT NO: STREET NO: STREET NAME:

SUBURB: POST CODE:

MOBILE NO: HOME NO:

EMAIL:

PART B - DETAILS OF LAND

ASSESSMENT NO:

PROPERTY ADDRESS

UNIT NO: STREET NO: STREET NAME:

SUBURB:

PART C - DETAILS OF OCCUPANT OF SEPARATE PART OR UNIT

OCCUPANT 1

FAMILY NAME: GIVEN NAMES:

RELATIONSHIP TO APPLICANT:

OCCUPANT 2

FAMILY NAME: GIVEN NAMES:

RELATIONSHIP TO APPLICANT:

If a family member, please provide evidence - acceptable evidence includes copy of: Medicare card, birth certificate.

*If applicable, please attach relevant details of any additional residents in the separate allotment and specify their relationship to the applicant.

PART D – DETAILS OF ARRANGEMENT

DATE UNIT OCCUPIED: INTENDED LENGTH OF STAY:

Please attach a copy of any written arrangement.

RENT/BOARD PAYABLE FOR THE UNIT No Yes, please specify amount: \$_____ per month.

IF RENT IS PAYABLE:

- Is the occupant a tenant paying market rent for the Unit (in money or in kind) which is not solely a contribution to food and utilities No Yes
- Does this include provision of food/utilities No Yes

Please answer the following questions:

A. Is the resident treating the Unit as a self-contained and self-sufficient residence?

No Yes

B. Does the resident have the only key (except for a spare held by the landowner for emergency access purposes)?

No Yes

B. Is the resident responsible for their own cleaning of the Unit?

No Yes

C. Does the resident do their own cooking and dishes?

No Yes

D. Does the landowner use the Unit for any purpose including storage?

No Yes

Please provide any further information below whether the occupant/s in the Unit have exclusive occupation of the of the Unit as a dwelling.

*Please attach a separate document if additional room required.

PART E - APPLICANT'S DECLARATION

I, _____ (insert full name) of
_____ (address) solemnly and sincerely declare:

(a) I am a ratepayer for the Property as defined under the Local Government Act 2019 or have authority to make this application on behalf of the property owner.

(b) I have attached all relevant documents requested.

(c) I acknowledge that if required, I will provide any additional proof of relationship and/or arrangements with the resident/s of the Unit. Evidence required may include, but is not limited to:

- a. birth certificates;
- b. Medicare card; and
- c. any written agreement regarding occupancy arrangements.

(d) All information and responses contained in this application and any supporting documents I provide are true and correct to the best of my knowledge, and I have truthfully and accurately described the living arrangements at the Unit.

(e) I understand that Council may, in its sole discretion, grant a rate concession and impose conditions as it considers appropriate.

(f) If Council grants a rate concession, I agree to inform Council of any substantial changes to living arrangements of the Unit as soon as reasonably practicable and acknowledge that failure to do so may render the concession null and void.

(g) If the rate concession is subject to condition/s and I fail to comply with a condition/s, Council may by notice withdraw the concession and I will be required to pay an amount, on or before a date specified in in the notice, to neutralize any benefits of the rate concession.

(h) If I have provided false or misleading information to gain a concession, the assessment will be restored to its full amount.

(i) This declaration is true, and I know it is an offence to make a statutory declaration knowing it is false in a material particular.

(j) In the event of any false or misleading information provided, any charges which would have been waived or deferred will be restored to the full amount, including any interest not charged that would have otherwise been payable.

Declared at _____ the _____ day of _____ 20_____

Signature of declarant: _____

Print full name of witness: _____

(witness must be at least 18 years of age)

Signature of witness: _____

Contact details of witness: _____

PART F - OCCUPANT'S DECLARATION

This declaration should be completed by all residents in the Unit 18 years or over.

I, _____ (insert full name) of

_____ (address) solemnly and sincerely declare:

(a) I have been provided with a complete copy of this application and confirm the information specified is true and correct.

(b) This declaration is true and I know it is an offence to make a statutory declaration knowing it is false in a material particular.

Declared at _____ the _____ day of _____ 20_____.

Signature of declarant: _____

Print full name of witness: _____

(witness must be at least 18 years of age)

Signature of witness: _____

Contact details of witness: _____