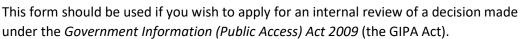
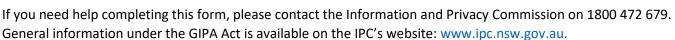
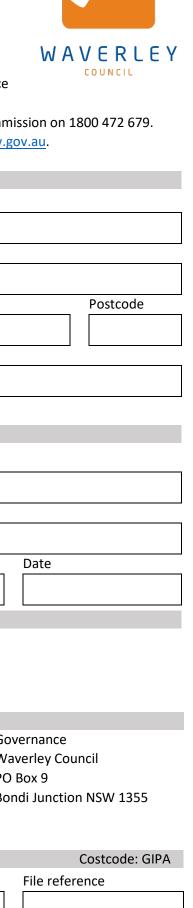
Government Information (Public Access) Act 2009

INTERNAL REVIEW APPLICATION (FORM A17)



You must lodge this form with Council within 20 working days after receiving the notice of decision.





APPLICANT									
Title	Given Name/s				Family Name	mily Name			
Organisation									
Postal Address Postcode									
Daytime Telephone Email Address									
I agree to receive correspondence to the above email address.									
GOVERNMENT INFORMATION									
Decision to be	reviewed								
Date of decisi	on								
Applicant's signature							Date		
APPLICATIO	N EEE								
Payment of th		ation fee can	be made by:						
Visa/Mastercard/Amex (0.8% surcharge applies)									
Cheque/Money Order to PO Box 9, Bondi Junction 1355									
Eftpos/Cash at the Customer Service Centre.									
HOW TO LO	DGE THIS AP	PLICATION							
In person:	Waverley Council Customer Service Centre				Mail:	Gov	Governance		
	55 Spring Street					Waverley Council PO Box 9			
Bondi Junct									
9.00 am to 5.00 pm Moi			nday to Friday			Bon	Bondi Junction NSW 1355		
Email:	info@wav	erley.nsw.go	v.au						
OFFICE USE	ONLY		Costcode: GIPA						
Received by			Date recei	ved		File refere	ence		