



**PART 4 - LEVY PAYMENT DETAILS**

If you have already paid the full levy, please attach a copy of your receipt showing proof of payment.

Amount Paid		Date Paid
\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Where payment was made?  Council (indicated in **PART 3**)  Long Service Corporation  Other

If other, provide details:

**PART 5 - REFUND PAYMENT DETAILS**

Such application **MUST** be made to the Corporation **within 12 months of payment**. All refunds will be paid via direct deposit. Refunds will be made to the nominated account of the bushfire exemption applicant. The bank account details you provide on this form will be used to make your refund payment.

**The Long Service Corporation will not accept liability for funds deposited into the wrong account due to an error in the BSB/Account number provided.**

Bank Branch - where account was opened	BSB Number
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Account Holders Name/s	Account Number - <b>DO NOT</b> enter your card number
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

**PART 6 - APPROVING AUTHORITY TO COMPLETE**

This section must be signed and dated by an Approving Authority officer (eg. council and/or private certifier). Please be sure to print the Approving Authority officer's name.

I declare the information of the bushfire exemption applicant is the applicant for the aforementioned **DA/CC/CDC** and the works are being approved as bushfire relief of 2019/2020.

Approving Authority Officer's Name	Signature	
<input type="text"/>	<input type="text"/>	
Date	Phone	BPB Number
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Email of Approving Authority Officer		
<input type="text"/>		

**PART 7 - APPLICANT'S DECLARATION**

This application must be signed by the bushfire exemption applicant (the applicant of the building approval).

I declare that the information provided on this form is true and correct to the best of my knowledge. I make this declaration with the knowledge that a false or misleading statement may result in a penalty of up to \$5,500 under the provisions of Section 58A of the *Building and Construction Industry Long Service Payments Act 1986*. I authorise payment of the refund to be made into the bank account, as referred to in **PART 5**.

Name	Signature
<input type="text"/>	<input type="text"/>
Date	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

**RETURN**

Please complete and return to:

 Scan and email to [levy@longservice.nsw.gov.au](mailto:levy@longservice.nsw.gov.au) **or**  Post to Locked Bag 3000, Central Coast MC NSW 2252