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| ABN 42 686 389 537 – PO BOX 151, KYNETON VIC 3444  T 03 5422 0333 – F 03 5422 3623 – [mrsc@mrsc.vic.gov.au](mailto:mrsc@mrsc.vic.gov.au) – mrsc.vic.gov.au | |

**Consent for internal review of an infringement**

You must complete this form if another person is acting on your behalf and appealing an infringement that was issued in your name.

**Your details**

|  |  |  |
| --- | --- | --- |
| First name |  | |
| Last name |  | |
| Address |  | |
| Town/Suburb |  | |
| State |  | |
| Postcode |  | |
| Infringement Notice Number | |  |

**Declaration**

I consent for (name of person authorised to act on your behalf) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to apply for an internal review on my behalf for the above infringement notice.

Signature of person named on the infringement \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of other person with consent to apply \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_