

Expiation Review Form



Expiation Number:	Name:
Car Registration Number:	Date Issued:
Postal Address:	
Contact Number:	Contact Email:

Please Note: Your expiation will be placed on hold pending a review. No further fees will apply while the review process is undertaken. You will be advised of the outcome in writing.
I wish to informally dispute the abovementioned expiation for the reasons stated below:

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Signature:	Date:
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Please return to:

172 Montacute Road, Rostrevor SA 5073

Email: mail@campbelltown.sa.gov.au