		OFFICE USE ONLY		
		DATE/TIME RECEIVED		
		100 POINT ID VERIFICATION CONDUCTED BY		
		PROCESSED BY:		
City of Camp	belltown			
Address	on for Remov Suppression		ne or	
Address			о 🗀 о	
Please note: All Asses	sment Records relating to you must	be referenced in this app	lication.	
APPLICANT'S FU	LL NAME AND CONTACT D			
Surname:	First Name:	Middle Na	Middle Name:	
Previous Names (if a	applicable):			
Postal Address:				
Suburb:	State	ate: Post Code:		
	Mobi	le No:		
Phone No:	Mobi	le No:		
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p residence for electoral purposes	UPPRESSED roperty is your place of	CERTIFICATE C TITLE REFERENCE (IF KNOWN)	
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p	UPPRESSED roperty is your place of	TITLE REFERENCE	
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p	UPPRESSED roperty is your place of	TITLE REFERENCE	
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p	UPPRESSED roperty is your place of	TITLE REFERENCE	
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p	UPPRESSED roperty is your place of	TITLE REFERENCE	
Phone No: Email Address: DETAILS	OF PROPERTIES CURRENTLY S le properties please specify which p	UPPRESSED roperty is your place of	TITLE REFERENCE	

APPLICATION TO REMOVE NAME OR ADDRESS SUPPRESSION

- a) APPLICANT'S FULL NAME AND CONTACT DETAILS Insert your particulars, including your full name at the time that the original application was processed. If you have ever been known by another name (e.g. maiden name or married name), and some or all properties may be shown in Council databases under that name, it will be necessary to state the previous name in the space provided. If there is a discrepancy between the details provided and those stored in Council databases, a Council representative may contact you for clarification. It is therefore important to provide business hours contact details.
- b) DETAILS OF NAME OR ADDRESS SUPPRESSED Insert the address(es) of all properties where your name or address is currently suppressed (e.g. 123 Sample Road Rostrevor 5073).
- c) APPLICATION / ACKNOWLEDGEMENT This panel has been completed for you and needs no further amendment. It is important that you read and understand this section before signing. The signature provided must match the identification documents produced. Please note that it is not necessary to have your signature witnessed on this application.

If there is insufficient space in either section B or C, an additional A4 sheet(s) detailing the relevant information may be attached to the application. This should be done using a single staple in the top left hand corner of the application. Note that you must initial any additional page(s).

This form must be submitted together with 100 points of ID, including at least one primary and one secondary document (see below). Note that the ID provided must also include at least one current, original, government issued document containing a photograph, and one containing a signature. For full details please refer to the 100 Point Identification *Check* form and associated guidance notes.

Primary Identification Documents	
Note - maximum total score for primary documents is 70 points, regardless of how many documents from this category are produced	Points Value
Birth Certificate	70
Passport	70
Current Australian Visa	70
Australian Citizenship Certificate	70

Note - multiple forms of secondary identification may be provided. However, document types marked with an asterisk can only be used as one form of identification (e.g. only one membership card will be accepted) Australian Driver's Licence	Points Value 40
Proof of Age Card	40
Government Staff ID (Commonwealth / State)	40
Firearms Licence	40
Social Security/Pension Card	40
Department of Veterans' Affairs Card	40
Tertiary Education Institution Student ID Card	40
Certificate of Title or other Mortgage / Security documents over property *	35
Written reference from current or previous employer or school teacher (within the last 2 years) *	35
Written reference from another referee (e.g. landlord, rental agent, etc) *	25
Non-Government Employment ID Card	25
Commonwealth/State issued Paper Licence (e.g. Interim Driver's Licence)	25
Other Licence (e.g. Foreign Driver's Licence)	25
Credit/Debit/ATM Card (maximum of one per Financial Institution)	25
Bank Statement or Passbook showing current residential address * Medicare Card *	25 25
	25
Membership Card (e.g. Union, Club, Professional Association, Library etc) *	25
Rates Notices with evidence of payment (e.g. Water, Council etc.) *	25
Utility Bill/Registration Notice with evidence of payment (e.g. Electricity, Gas, Telephone etc.) *	25
Adoption or Marriage Certificate *	25
Electoral Roll Records *	25
Telephone directory listing (and contact on the number provided) *	25

APPLICATION I ACKNOWLEDGEMENT

Dated:

I hereby apply to remove restrictions on my name or address when searches are performed on the City of Campbelltown Assessment Record and Voters Roll referenced in this application.

details being r	application, I ackr made available to performed against th	customers of the	Corporation	of the City of	of Campbelltowr	n whe'n
Signed:						