

Application for Action by Court for Infringements

Please complete this form if you wish to have your infringement matter heard in Court. Once you have completed the form, please post it to **Manningham City Council**, **PO Box 1**, **Doncaster**, **Victoria 3108** or drop it in at the customer service desk at **Manningham Civic Centre**, **699 Doncaster Road**, **Doncaster**.

YOUR DETAIL										
Infringement number				Vehicle registration number (if applicable)						
First name				Surname						
Street address										
Suburb				State		Postcode				
Phone or mobile	number									
Email address										
Please comple		ection if t	he infring	ement has be	een is	ssued to a co	mpany.			
	ete this s	ection if t	he infring	ement has be	een is	ssued to a co	mpany.			
Your position Company name Company ABN of	ete this s							e the	matter c	lealt with
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For our privacy policy, please visit www.manningham.vic.gov.au/privacy

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Interpreter service 181 9840 9355											
普通话	廣東話	Ελληνικά	Italiano	فارسى	العربية						