

Form Completion Guide – Internal Review:

To ensure that you complete the relevant Internal Review form correctly, you will need to select the completion guide for either an Individual or Company. A sample and completion guide of an Internal Review under an Individual's name is on **page 2** and for a Company it is on **page 3**.

[Internal Review
Completion guide
\(Individual\)](#)

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or print page 2
of this document

[Internal Review
Completion guide
\(Company\)](#)

Click the above button
or print page 3
of this document

Use this form if you require an agency to review its decision to issue you with an infringement notice anytime before the infringement penalty is lodged with the Infringements Court.

Your full name (given names then surname). Do not use nicknames or initials. (If you have the infringement notice or any other correspondence sent to you by CCV, write your name exactly as it appears there.)

Your complete residential address. Do not use a PO Box. If you have an urban address, your complete address may require a unit number, a street number, a street name, and a suburb or postcode. If you have a rural address, your address requires the above if applicable, or if not it may be complete with a RMB number or the name of your property and a suburb or postcode. If you have an overseas address, provide the country

APPLICATION FOR INTERNAL REVIEW

Please complete all sections below to have your Infringement reviewed.
Please note only one Internal Review may be submitted per Infringement Notice.



Civic Compliance Victoria

Section 1 - Your Details

Name	Given Name and Surname S A M S A M P L E		
Of (if applicable)	Corporation Name and ACN/ABN		
Address	Street Number and Street Name 1 S A M P L E S T		
	Suburb S A M P L E V I L L E	State V I C	Postcode 3 0 0 0

Please enter your Infringement number

Section 2 - Infringement Details (Please complete a separate form for each infringement you wish to have reviewed)

Infringement No.	1 1 1 1 1 1 1 1 1 1	Obligation No.	0 1 1 1 1 1 1 1 1 1
Infringement Type (please tick one):			
Traffic Camera	<input type="checkbox"/> Fines detected by an automatic detection device such as a speed or red light camera	Vic to ria Police On-the-Spot	<input type="checkbox"/> Fines issued by a Vic to ria Police Officer
Citylink	<input type="checkbox"/> Fines issued as a result of failure to pay a Citylink toll within the prescribed time frame	Other	<input type="checkbox"/> Fines issued by other agencies such as Vic Roads, Department of Primary Industries, Department of Transport, Marine Safety etc
Easlink	<input type="checkbox"/> Fines issued as a result of failure to pay an Easlink toll within the prescribed time frame		

Please tick the appropriate box

Please enter your Obligation number

Please tick the appropriate box

Section 3 - Grounds for Application			
Please tick the relevant box (Details of each ground for Internal Review appeal are provided on the back of this form)			
Exceptional Circumstances	<input type="checkbox"/>	Contrary to Law	<input type="checkbox"/>
Special Circumstances	<input type="checkbox"/>	Mistaken Identity	<input type="checkbox"/>
		Penalty Reminder Notice Re Waiver Request	<input type="checkbox"/>

Please provide your reasons for the internal review here.
If you require more space, please attach a separate sheet. If you attach documentation, please write "See attached" in this box.

Explain circumstances/ grounds for your application here (please attach a separate sheet if you require more space):

I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s.22 (2)(e) of the Infringements Act 2006

Signature *S Sample* Date 01/01/08

Your signature (that is, the signature of the person named on the infringement notice sent by CCV).

The date when the declaration was signed


Use this form if you require an agency to review its decision to issue you with an infringement notice anytime before the infringement penalty is lodged with the Infringements Court.

Your full name, i.e., the full name of the authorised officer (given names then surname). Do not use nicknames or initials

The name of the Company you represent (If you have the infringement notice or any other correspondence sent to you by CCV, write the name exactly as it appears there).

APPLICATION FOR INTERNAL REVIEW

Please complete all sections below to have your Infringement reviewed.
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Civic Compliance Victoria

Section 1 - Your Details

Name Given Name and Surname S A M S A M P L E

Of Company Name and ACN/ABN E X A M P L E P T Y L T D .

Address Street Number and Street Name 1 0 E X A M P L E S T

Suburb E X A M P L E V I L L E State V I C Postcode 3 0 0 0

Please enter your Infringement number

Infringement No. 1 1 1 1 1 1 1 1 1 1

Obligation No. 0 1 1 1 1 1 1 1 1 1

Please enter your Obligation number

Section 2 - Infringement Details (Please complete a separate form for each infringement you wish to have reviewed)

Infringement Type (please tick one):

<p>Traffic Camera <input type="checkbox"/> Fines detected by an automatic detection device such as a speed or red light camera</p>	<p>Vicoria Police On-the-Spot <input type="checkbox"/> Fines issued by a Victorian Police Officer</p>	
<p>Citylink <input type="checkbox"/> Fines issued as a result of failure to pay a Citylink toll within the prescribed timeframe</p>	<p>Other <input type="checkbox"/> Fines issued by other agencies such as Vic Roads, Department of Primary Industries, Department of Transport, Marine Safety etc</p>	
<p>Easlink <input type="checkbox"/> Fines issued as a result of failure to pay an Easlink toll within the prescribed timeframe</p>		

Section 3 - Grounds for Application

Please tick the relevant box (Details of each ground for Internal Review appeal are provided on the back of this form)

<p>Exceptional Circumstances <input type="checkbox"/></p>	<p>Contrary to Law <input type="checkbox"/></p>	<p>Penalty Reminder Notice Re Waiver Request <input type="checkbox"/></p>
<p>Special Circumstances <input type="checkbox"/></p>	<p>Mistaken Identity <input type="checkbox"/></p>	

Explain circumstances/ grounds for your application here (please attach a separate sheet if you require more space):

Signature S Sample

Date 0 1 0 1 0 8

Your signature (that is, the signature of the authorised Company officer).

The date when the declaration was signed

I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s.22 (2)(e) of the Infringements Act 2006