Infringement Notice Withdrawal Request

Applicant Details (the applicant must be the person named on the infringement)

Full name		**Date of birth**	
Company			
Address			
Suburb		**Postcode**	
Contact Number		**Email**	

Relating to the Offence of			
Infringement No		**Date of Offence**	

Hereby request that the aforementioned infringement notice be withdrawn because:

Signed		**Date**	

Contact Us

Enquiries
Call: (08) 9526 1111
Fax: (08) 9525 5441
Email: info@sjshire.wa.gov.au

In Person
Shire of Serpentine Jarrahdale
6 Paterson Street, Mundijong WA 6123
Open Monday to Friday 8.30am-5pm (closed public holidays)

www.sjshire.wa.gov.au

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