Submission for Review of Expiation Notice

Applicant Name: _____

Telephone: _____

Email: _____

Mailing Address: _____

Post Code: _____

Vehicle Registration Number: _____

Expiation Notice Number: _____

The Expiation of Offences Act, 1996 includes provisions for Expiation Notices to be withdrawn, if the matter is considered trifling, as defined in Section 4(2) of the Act.

Please provide an overview of the circumstances you are basing your Expiation Notice review.

Evidence must be supplied to support your Expiation Notice review. This may include items such as a copy of permit, mechanical repair report, letter from medical provider, or a statutory declaration witnessed and signed by a Justice of the Peace or other authorised witness.

Residential/ Visitor Permit	☐	Letter from Medical Provider	☐
Mechanical Report	☐	Verified Statutory Declaration	☐

If you cannot pay the fee by the due date, you may be eligible to enter into a payment arrangement, by contacting the Fines Enforcement & Recovery Unit on 1800 659 538 (fee may apply).

Applicant Signature:_____**Date:**_____

City of Norwood Payneham & St Peters
175 The Parade, Norwood SA 5067

Telephone 8366 4555
Email townhall@npsp.sa.gov.au
Website www.npsp.sa.gov.au
Socials /cityofnpsp @cityofnpsp

City of Norwood Payneham & St Peters