

# REQUEST FOR AN ARCHAEOLOGICAL CONSENT REVIEW



Please refer to *Heritage Council Protocol 4 – Archaeological Consent Reviews* for information on how the Heritage Council will conduct Consent Reviews.

## 1. Your Details

Title	
First Name	
Surname	
Address	
Email Address	
Telephone	

Is this request on behalf of a company or organisation?	Yes/No
If yes, what is its name?	
What is your position title?	

Are you (or your company/organisation):

- The consent applicant
- The owner or government asset manager of the site or artefact

## 2. Site or Artefact Details

Site or artefact name	
Address or GPS location	

## 3. Consent Determination Details

Consent Application Number	C
Date of Executive Director's determination	

*Note: This request must be lodged within 28 days of the Executive Director's determination.*

The Executive Director's determination was to:

- Issue a consent with conditions [s.124(7)]
- Refuse the application [s.124(4)(b)]

Please append the consent application and the Executive Director's determination to this request.

#### 4. Consent Review Request

I request the Heritage Council to conduct a review into:

- The Executive Director's refusal of the consent application
- The following conditions applied to the consent: (specify conditions)

Reasons for the review request:

#### 5. Fee Payment

To determine the appropriate fee, please refer to the Fee Schedule and to the *Heritage Regulations 2017* available on the Heritage Council website at:

<http://heritagecouncil.vic.gov.au/registrations-reviews/documents-for-registrations-and-reviews/>.

If you require assistance determining the correct fee, please contact the Heritage Council Hearings Coordinator on 03 9194 0868.

The Heritage Council may choose to waive the fee in certain circumstances. If activities associated with this request are being undertaken by a community group or for conservation, educational research or public safety, it may be possible to apply for a waiver of the permit fee. If you feel you may be eligible for a waiver, please contact the Heritage Council Hearings Coordinator on 03 9194 0868.

Amount due: \$\_\_\_\_\_ (Subject to any fee waiver)

Please note that this request for an archaeological consent review is not a valid request until payment is made.

*Payment may be made via BPAY, Post billpay or by cheque at your local Australia Post office. Please refer to the 'Payment Options' section at the end of this form for payment details.*

#### 6. Review Requestor Statement

I state that the information I have given on this form is correct to the best of my knowledge.

Name	
Signature	
Date	

# HERITAGE COUNCIL FORM H





## 7. Form lodgment details

Please send this form, along with any written hearing submission and any statement of evidence, by the designated submission close date to:

**Heritage Council of Victoria  
DELWP GPO Box 527  
Melbourne VIC 3001**

**Email:** [heritage.council@delwp.vic.gov.au](mailto:heritage.council@delwp.vic.gov.au)

For further information, please contact the Heritage Council Hearings Coordinator on 03 9194 0868.

<b>Payment Options: (Please retain Receipt for future reference)</b>															
 Cheque payment can be made at your Local Australia post outlet Any dishonored Cheque will incur a fee of \$110.00															
 <b>BPAY Biller Code: 72637</b> <b>Customer Ref: 180123456782</b> Telephone & Internet banking BPay, Contact your bank or financial institution to make this payment from your cheque, savings, debit, credit card or transaction account. More info: <a href="http://www.bpay.com.au">www.bpay.com.au</a>	  <b>*206 0834 0000018012345678 96</b> <b>By Cash, Cheque or Debit Card only</b>														
<b>Please record payment details below (Application will not be processed without accurate payment details)</b>															
<b>BPAY</b> <i>(please tick)</i> <input type="checkbox"/>  Amount Paid* <input type="text"/>  Your Bank Name* <input type="text"/>  Receipt No* <input type="text"/>  Receipt Date* <input type="text"/>	<b>Australia post</b> <i>(please tick)</i> <input type="checkbox"/>  Amount Paid* <input type="text"/>  Unique Sequence No* <input type="text"/> <small>(see sample of Australia Post receipt)</small>  Payment method* Cash /Cheque /Card <i>(please circle)</i>  Receipt Date* <input type="text"/>  <div style="border: 1px solid black; padding: 5px;"><p style="text-align: center;"><b>Sample of Australia Post receipt</b></p><p style="text-align: center;">A U S T R A L I A P O S T</p><p>FITZROY SOUTH LPO 3065</p><table style="width: 100%;"><tr><td>Collections</td><td style="text-align: right;">\$ 0.10</td></tr><tr><td>Dept Environment Land Water &amp; Planning</td><td></td></tr><tr><td>Account No: 0834 0000016010000002 73</td><td></td></tr><tr><td>Unique Sequence No: 332646/02/56537</td><td></td></tr><tr><td><b>TOTAL</b></td><td style="text-align: right;"><b>\$0.10</b></td></tr><tr><td>Payment Tendered Details :</td><td></td></tr><tr><td style="padding-left: 40px;">Cash</td><td style="text-align: right;">0.10</td></tr></table></div>	Collections	\$ 0.10	Dept Environment Land Water & Planning		Account No: 0834 0000016010000002 73		Unique Sequence No: 332646/02/56537		<b>TOTAL</b>	<b>\$0.10</b>	Payment Tendered Details :		Cash	0.10
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