

Chimney Flue Cleaning Rebate Claim Form

Applicant Details			
Applicant's Name			
Postal Address <small>(rebate will be sent to this address)</small>			
Property Address where wood heater is located <small>(if different to postal address)</small>			
Phone/Mobile no.			
Email Address			
Bank account details for rebate	BSB	Account number	
Applicant's Signature <small>(I, the above applicant, certify that details provided here are true and accurate)</small>			Date
How did you find out about the chimney/flue cleaning rebate? <small>Please tick</small>		<input type="checkbox"/> Brochure <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> Library/Council <input type="checkbox"/> Other, please give details	
Complete this section only if Applicant is different to the Property Owner			
Property Owner's Name			
Postal Address			
Phone/Mobile no.			
Property Owner's Signature			Date
Details of Wood Heater Professionally Cleaned			
Number of Wood Heating Systems at property		Number of Wood Heating Systems that were professionally cleaned	
Type of Wood Heating System that was professionally cleaned		Number cleaned	Location in residence
Open fireplace and its chimney/flue			
Conventional wood heater (including pot belly stoves and older-style slow combustion heaters) and its chimney/flue and cowl (if present)			
Controlled combustion heater and its chimney/flue and cowl (if present)			
Other? If so, please give details			
Details of Business engaged to clean the chimney/flue			
Business Name			ABN
Business Address			
Phone/Mobile no.			
Email address			
Cost of service (inc gst) <small>(as indicated on the receipt)</small>		Original receipt attached?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Contact Name			
Signature			Date

When form is completed, please return to Council with a copy of the receipt at council@muswellbrook.nsw.gov.au attention "Sustainability" or drop into Council at 60-82 Bridge Street, Muswellbrook.

Wood Heater & Flue Cleaning Cash Incentive Reference Number	
Has the applicant satisfied all conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, what action needs to be taken?	
Cash Incentive Amount	\$50.00
Name/title of authorising Council Officer	
Signature	Date

For Office Use Only