

# Refund Request Form

Proof of Payment must accompany this form

Applicant Details			
Details of person requesting refund. Details must match the original payee			
Name:			
Postal Address:			
Telephone number:			
Email Address:			
Property No. in Credit:			
Amount of Refund:	\$		
Refund Details: Reason refund is required. Supporting info – receipt no. etc.			
Applicant Signature:	Proof of Payment Attached <input type="checkbox"/>		
Date:			
Personal ID Checked	<input type="checkbox"/>	Officer	

EFT Details			
Account Name:			
Name of Banking Institution:			
BSB:			
Account Number:			
Account Details Verified	<input type="checkbox"/>	Officer	Date / /

**Information Privacy Act 2009.** Burdekin Shire Council is collecting the information you supply on this form to be used in the Finance Department for processing of refunds. The information will only be used by authorised Council Officers and will not be given to any other person or agency unless required by law to do so. This information is handled in accordance with the Information Privacy Act 2009.

Office Use Only							
				Prop ID No		Land ID No	
CSO Initials		Date Received	/ /	Action	Rates	Function ID No	670