



Ashfield Council

Security & Damage Deposit Refund Form

260 Liverpool Road Ashfield NSW 2131
PO Box 1145 Ashfield NSW 1800
Cashier Hours: Monday – Friday, 8.40am – 4.00pm

DX 21221 Ashfield
ABN 11211068961

Tel (02) 9716 1800
Fax (02) 9716 1911

info@ashfield.nsw.gov.au
www.ashfield.nsw.gov.au

INTRODUCTION	<p>This form is required to obtain a Security or Damage Deposit refund for the purpose of Hall Hire, Park Hire, Damage Deposits & Security Deposits.</p> <p>Deposit refunds will only be paid via EFT directly into your saving or cheque account. This form should accompany your booking and bond payment, and the details herein will be used for your refund.</p>																							
REFUNDS	<p>Refunds will be made directly into the bank account as listed below.</p> <p>This account must be in the same name as the original payer, and if paid by cheque it must match the cheque details.</p>																							
WHERE DO I SEND THIS FORM?	<p>This form should be returned with your payment to: Ashfield Council, PO Box 1145, ASHFIELD NSW 1800.</p>																							
REFUND BANK DETAILS	<table border="1"> <tr> <td data-bbox="352 887 879 958">Bank Or Financial Institution</td> <td colspan="2" data-bbox="879 887 1522 958"></td> </tr> <tr> <td data-bbox="352 958 879 1030">Name In Which Account Is Held (Payee)</td> <td colspan="2" data-bbox="879 958 1522 1030"></td> </tr> <tr> <td data-bbox="352 1030 879 1102">BSB Number (Must Be 6 Digits)</td> <td colspan="2" data-bbox="879 1030 1522 1102"></td> </tr> <tr> <td data-bbox="352 1102 879 1173">Account Number (9 Digits Maximum)</td> <td colspan="2" data-bbox="879 1102 1522 1173"></td> </tr> <tr> <td data-bbox="352 1173 879 1245">Email - For Payment Advice (will post to the address below if not available)</td> <td colspan="2" data-bbox="879 1173 1522 1245"></td> </tr> </table>			Bank Or Financial Institution			Name In Which Account Is Held (Payee)			BSB Number (Must Be 6 Digits)			Account Number (9 Digits Maximum)			Email - For Payment Advice (will post to the address below if not available)								
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DECLARATION	<p>I declare that the above information is correct, and that I will advise Ashfield Council if my details change, and Ashfield Council shall not be held responsible for my failure to do so.</p>																							
PAYEE'S DETAILS	<table border="1"> <tr> <td data-bbox="352 1391 676 1451">Name Of Payee</td> <td colspan="2" data-bbox="676 1391 1522 1451"></td> </tr> <tr> <td data-bbox="352 1451 676 1512">Address Details</td> <td colspan="2" data-bbox="676 1451 1522 1512"></td> </tr> <tr> <td data-bbox="352 1512 676 1572">Home Number</td> <td colspan="2" data-bbox="676 1512 1522 1572"></td> </tr> <tr> <td data-bbox="352 1572 676 1632">Work Number (w)</td> <td colspan="2" data-bbox="676 1572 1522 1632"></td> </tr> <tr> <td data-bbox="352 1632 676 1693">Mobile Number (m)</td> <td colspan="2" data-bbox="676 1632 1522 1693"></td> </tr> <tr> <td data-bbox="352 1693 676 1753">Authorised Signature</td> <td colspan="2" data-bbox="676 1693 1522 1753"></td> </tr> <tr> <td data-bbox="352 1753 676 1814">Date</td> <td colspan="2" data-bbox="676 1753 1522 1814"></td> </tr> </table>			Name Of Payee			Address Details			Home Number			Work Number (w)			Mobile Number (m)			Authorised Signature			Date		
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OFFICE USE	Amount \$	Date	Receipt Number	Council Officer																				

Privacy Notification: The personal information you have supplied on this form assists Council Officers in determining your application. The supply of information is voluntary. If you do not provide all details requested, Council may be unable to process your application. The details you provide are stored at Council Offices and are not made publicly available. For more information about your privacy please contact Ashfield Council on 9716 1800.