

Electronic Funds Transfer (EFT) Refund Details

A1. Applicant Details

Surname/s	<input type="text"/>	Given Name/s	<input type="text"/>
OR			
Company/ Organisation	<input type="text"/>	ABN	<input type="text"/>
Postal Address	<input type="text"/>		
Telephone	<input type="text"/>	Mobile	<input type="text"/>
Facsimile	<input type="text"/>	Email	<input type="text"/>
How do you wish to receive remittance advice?		<input type="checkbox"/> Mail	<input type="checkbox"/> Email

A2. Bank Details

Bank Name	<input type="text"/>		
Account Name	<input type="text"/>		
BSB Number	<input type="text" value="-"/>	Account Number	<input type="text"/>
Signature	<input type="text"/>		

A3. Land Description

Lot Number	<input type="text"/>	Section	<input type="text"/>	DP/NPP/SP	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>
Unit/Street No	<input type="text"/>	Street	<input type="text"/>		
Suburb/Town	<input type="text"/>				

A4. Application Details

Description	<input type="text"/>
Application Number(s)	<input type="text"/>

THIS DOCUMENT IS NOT TO BE REGISTERED IN ECM