Customer Service | 1300 292 872 | (02) 6670 2400 PO Box 816 Murwillumbah NSW 2484 Fax (02) 6670 2429 | ABN 90 178 732 496 tsc@tweed.nsw.gov.au | www.tweed.nsw.gov.au



Application for Refund of Bond Against Hire Damage

External Form

(OFFICE USE)				
Date Received		Refund Status:	Approved	Declined
Ful	II Refund	Part Refund	Approved Refund	Amount \$
Attach copy of report after inspection has been completed				
A1. Applicant		Date:		
Organisation Name: (if applicable)				
ABN (if applicable)				
Contact Name:				
Postal Address:				
Suburb			State:	Post Code:
Telephone			Mobile	
Facsimile			Email	
A2. Premises				
Building / Park Hired (include areas of use				Hire Date:
- Hall/kitchen)				
A3. Declaration				
I/we as the applicant and payee of bond for the hire of the premises noted in Section A2 would like to apply for a refund of bond.				
I/we understand that the bond refund is subject to the standard of the hire facilities conditions being met and declare that I/we have met these conditions. I/we understand that the refund of bond will be determined upon inspection of the premises.				
Signature/s ALL applicants				