

Request for refund application form

This form is to be completed by the property owner for the purpose of requesting a refund, **where credit is available on a rates, water or debtor account**. Processing a refund request may take up to 21 calendar days

Applicant Details

Full Name			
Postal Address			
Email Address			
Creditor Number (if known)		Phone number	

Refund Information

Assessment No					
Property Address					
Refund	<input type="checkbox"/> Rates	<input type="checkbox"/> Water	<input type="checkbox"/> Debtor	Amount	

Banking Details

Banking Institution			
BSB Number		Account Number	
Account Name			

Applicant Declaration

I declare that I am the ratepayer for the property and the information given on this form is true and correct.

Applicant Name	
Applicant Signature	
Date	

Lodgement Details

Completed application forms may be lodged by:

Email	council@begavalley.nsw.gov.au		
Mail	PO Box 492 BEGA NSW 2550		
In person	Zingel Place, Bega NSW 2550		
Phone	02 6499 2222	Website	www.begavalley.nsw.gov.au

CRM Number		Date Received	
-------------------	--	----------------------	--