

### RENTAL BONDS

OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety

## OCCUPANCY REFUND OF BOND FORM

Form 604 - OR

Residential Tenancies Act 1997



## **IMPORTANT INFORMATION**

This form is to be used to refund an occupancy bond under the *Residential Tenancies Act 1997* (the Act). You can access the Act at www.legislation.act.gov.au. You may also obtain further information and forms at www.ors.act.gov.au.

#### **PRIVACY INFORMATION**

The Act authorises the Registrar-General to collect the information required by this form. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988* (C'wlth). However, the Registrar-General provides identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. Non-identifying information is regularly released to the Real Estate Institute of Australia.

#### **CONTACT INFORMATION**

Send completed forms to the Office of Regulatory Services: GPO Box 158, Canberra ACT 2601

Lodge in person at the **Office of Regulatory Services:** 255 Canberra Avenue, Fyshwick ACT 2609
Office Hours: 9:00am to 4:30pm Monday to Friday

General enquiries telephone number: (02) 6207 1178
Fax number: (02) 6207 1181
Website address: www.ors.act.gov.au

#### INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please use a black pen only.
- Any alteration to information provided on this form must be struck through with a black pen. Substitute information must be clear and all parties must sign in the margin. Do not use correction fluid or tape.
- Refunds are paid by 'Non Negotiable' cheque or by electronic funds transfer (EFT). Cash refunds are not available.
- If EFT account details are not completed in full refunds will be paid by cheque or held as unclaimed monies.
- If the funds are to be deposited by EFT into a third party account, the third party account details must be noted next to the occupant or grantor's name and the occupant/s or grantor must sign, authorising the funds to be refunded into the third party account.
- Only persons that have contributed to the bond should be noted as occupants. Children of the occupants or any other person that does not contribute to the payment of the bond should not be noted on this form.
- To avoid unnecessary delays, please ensure that the form is completed correctly and in full.
- Please note bond money will be divided equally among the occupants noted on the occupancy bond lodgement form
  upon receipt of a validly completed occupancy refund of bond form. If the occupants do not wish the bond to be
  refunded in equal amounts, a written statement signed by all occupants must accompany the occupancy refund of bond
  form indicating the amount to be refunded to each occupant.

If you need interpreting help, telephone: غساعدة في الترجمة الشفوية ، إتمال برقم الهاتف: ENGLISH ARABIC CHINESE 如果你需要传译员的帮助, 请打电话: Ako trebate pomoć tumača telefonirajte: Αν χρειάζεστε διερμηνέα τηλεφωνήσετε στο CROATIAN ITALIAN Se avete bisogno di un interprete, telefonate al numero MALTESE Jekk gňandek bžonn I-gňajnuna t'interpretu, čempel: PERSIAN PORTUGUESE اگر به ترجه شفاهی احتیاج دارید به این شماره تلفن کنید: Se você precisar da ajuda de um intérprete, telefone: SERBIAN Ако вам је потребна помоћ преводиоца телефонира те: Si necesita la asistencia de un intérprete, llame al: Tercümana ihtiyacınız varsa lütfen telefon ediniz: Nếu bạn cần một người thông-ngôn hãy gọi điện-thoại: SPANISH TURKISH VIETNAMESE TRANSLATING AND INTERPRETING SERVICE

131 450



**Signature** 

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Residential Tenancies Act 1997

						JUSTICE & (	COMMUNITY SAFETY				
OCCUPIED PREMISES DETAILS											
Unit Number	St	reet Number	Street & Comple	Street & Complex Name (If Applicable)			Suburb	Postcode			
REFUND DETAILS (Do not sign a blank form, ensure this section is completed in full before signing)											
Amount of bond to be refunded to the Occupant					Amount of bond to be refunded to the Grantor						
OCCUPANT DETA	ILS (d	Only occupants that	have contributed to the bon	d, not childr	en or other people ti	hat have not cor	tributed to the bond, s	hould be			
Full Name					Account Holders Name						
Postal Address					Account Number						
					BSB Number (6 digits)						
Suburb / Postcode					Bank and Brai	nch Name					
Signature					Contact Phone	e Number					
					Date Signed						
Full Name					Account Holders Name						
Postal Address					Account Number						
					BSB Number (	6 digits)					
Suburb / Postcode					Bank and Brai	nch Name					
Signature					Contact Phone	e Number					
					Date Signed						
Full Name					Account Hold	ers Name					
Postal Address					Account Num	ber					
					BSB Number (	6 digits)					
Suburb / Postcod	le				Bank and Brai	nch Name					

**Contact Phone Number** 

**Date Signed** 

Received By: Mail / Counter / Fax

OCCUPIED PREMISES DETAILS										
Unit Number	Street Number	Street & Complex I	Name (If Applicable)	Suburb	Postcode					
REFUND DETAILS	(Do not sign a blank form	, ensure this section is complete	d in full before signing)							
Amount of b	oond to be refunde	d to the Occupant	Amount of bond to be refunded to the Grantor							
GRANTOR DETAIL	S									
Full Name or Company			Account Hold	ers Name						
Postal Address			Account Num	Account Number						
			BSB Number (	6 digits)						
Suburb / Postcode			Bank and Branch Name							
Cit	<u>.</u>		Contact Phone Number							
Signature			Date Signed							
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OFFICE USE ONLY										

**Processed By:** 

**Authorised By:**