



RENTAL BONDS
OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety
REFUND OF BOND FORM



Form 602 - R

*Residential Tenancies Act 1997***IMPORTANT INFORMATION**

This form is to be used to refund a residential 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 or blue pen only.
- Any alteration to information provided on this form must be struck through with a black or blue 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.
- Where 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 tenant or lessor's name and the tenant/s or lessor must sign, authorising the funds to be refunded into the that third party account.
- 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 tenants noted on the bond lodgement form upon receipt of a validly completed refund of bond form. If the tenants do not wish the bond to be refunded in equal amounts, a written statement signed by all tenants must accompany the refund of bond form indicating the amount to be refunded to each tenant.

ENGLISH	If you need interpreting help, telephone:
ARABIC	: إذا احتجت لمساعدة في الترجمة الشفوية، إتصل برقم الهاتف:
CHINESE	如果你需要传译员的帮助，请打电话:
CROATIAN	Ako trebate pomoć tumača telefonirajte:
GREEK	Αν χρειάζεστε διερμηνεία τηλεφωνήστε στο
ITALIAN	Se avete bisogno di un interprete, telefonate al numero:
MALTESE	Jekk għandek bżonn l-għajjuna t'interpretu, ċempel:
PERSIAN	: اگر به ترجمه شفاهی احتیاج دارید به این شماره تلفن کنید:
PORTUGUESE	Se você precisar da ajuda de um intérprete, telefone:
SERBIAN	Ako vam je potrebna pomoć prevodioca telefoniрајте:
SPANISH	Si necesita la asistencia de un intérprete, llame al:
TURKISH	Tercümana ihtiyacımız varsa lütfen telefon ediniz:
VIETNAMESE	Nếu bạn cần một người thông-ngôn hãy gọi điện-thoại:
TRANSLATING AND INTERPRETING SERVICE	
131 450	
<small>Canberra and District - 24 hours a day, seven days a week</small>	



RENTAL BONDS
OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety
REFUND OF BOND FORM



Form 602 - R

*Residential Tenancies Act 1997***RENTED PREMISES DETAILS**

Unit Number	Street Number	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 Tenant	Bond Amount to be refunded to the Lessor/Managing Agent

TENANT DETAILS (Include account details beside each tenant in the spaces provided for refund by EFT otherwise a refund cheque will be posted)

Full Name		Account Holders Name	
Postal Address		Account Number	
		BSB Number (6 digits)	
Suburb / Postcode		Bank and Branch Name	
Signature		Contact Phone Number	
		Date Signed	
Full Name		Account Holders Name	
Postal Address		Account Number	
		BSB Number (6 digits)	
Suburb / Postcode		Bank and Branch Name	
Signature		Contact Phone Number	
		Date Signed	
Full Name		Account Holders Name	
Postal Address		Account Number	
		BSB Number (6 digits)	
Suburb / Postcode		Bank and Branch Name	
Signature		Contact Phone Number	
		Date Signed	

LESSOR / MANAGING AGENT DETAILS

Full Name or Company		Account Holders Name	
Postal Address		Account Number	
		BSB Number (6 digits)	
Suburb / Postcode		Bank and Branch Name	
Signature		Contact Phone Number	
		Date Signed	

OFFICE USE ONLY

Received By: Mail / Counter / Fax	Processed By:	Authorised By:
-----------------------------------	---------------	----------------