



REFUND OF FACILITY BOND

Customer Services Officer

Town Hall	<input type="checkbox"/>	Private Hire Swimming Pool	<input type="checkbox"/>
Recreation Centre	<input type="checkbox"/>	Private Hire Swimming Pool Grassed Area	<input type="checkbox"/>
Reserves	<input type="checkbox"/>	Prideaux Park Pavilion	<input type="checkbox"/>
Concert Chamber	<input type="checkbox"/>	Power Point Projector	<input type="checkbox"/>
Firmin Lodge (\$500.00)	<input type="checkbox"/>		

Date of Hire: _____ Date Booked: _____

Bond Held? Yes No Receipt No: _____

Bond: _____

Do you wish for your bond to be held by KDC for future use? Yes No

Hirer's Name: _____

Payee Details and or Deposit Slip:

Name of Bank: _____

Branch: _____

Branch Address: _____

Name of Account: _____

Bank	Branch Number	Account Number	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Particulars	Code	Reference
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorisation:

1. Please make payment to the above account by crediting my/our account
2. I/We understand and accept that Council accepts this authority only to credit our facility bond

Signature: _____ Date: _____

Signed: Customer Services Officer _____ Dated: _____

Custodian Cleaner / Pool Staff / Parks & Reserves / Contract Cleaners (Firmin Lodge)

Any notice/report from cleaners/security/duty officer? (If YES, attach report/details) YES NO
Any damage to venue? YES NO
Any cleaning costs? YES NO
Any Late Usage? (overtime) YES NO

Signed: Custodian Cleaner / Pool Staff _____ Dated: _____

Corporate Services Team Leader / Events & Venues Manager (Firmin Lodge)

The Bond Refund is approved as follows:

Refund DC to: _____
Address: _____
Email Address _____
Total bond paid by applicant \$ _____
Less deductions for: \$ _____
Cleaning penalty \$ _____
Key penalty \$ _____
Other: \$ _____
Total deductions \$ _____
BOND REFUND TOTAL \$ _____

Signed: Corporate Services Manager _____ Dated: _____
(Accountant in absence)

NB: In authorising this refund, you also certify that there was no unauthorised use beyond the hours booked, nor that any noise or Police complaints are pending.

Finance Assistant

Refund DC to: _____
Bank account: _____
General ledger code: 90 30 01 9302

Signed: Finance Assistant _____ Dated: _____

(If not a bond refund please attach refunding of fees form)