

# Refund form

You are receiving this form because excess funds have been identified in your public housing tenancy accounts/s. To receive a refund of these funds, please complete all sections of this form and return it to your local Housing office.

Tenant details			
Full name			
Residential address			
Home phone		Mobile	
Email			
Bank account for refund to be paid			
Account name			
Financial institution			
BSB		Account number	
Declaration - Read the following sections carefully before signing			
I,	(Full name in BLOCK LETTERS)		
<ul style="list-style-type: none"><li>• Have read and verify all the details outlined above are true and correct.</li><li>• Authorise the Department of Territory Families, Housing and Communities to pay any amounts owing to the bank account indicated above.</li><li>• Will advise the Department of Territory Families, Housing and Communities of any changes in the above mentioned particulars within a reasonable time.</li><li>• Understand the Department of Territory Families, Housing and Communities will not be responsible for any delays in payment or errors due to factors outside the reasonable control of the Department, including, but not limited to, delays or errors in the banking system.</li><li>• Understand the Department of Territory Families, Housing and Communities reserves the right to offset any amount paid in error against future payments.</li></ul>			
Tenant signature		Date	/ /
Disclaimer			
<p>The information collected will not be disclosed to anyone without your consent unless it is required or authorised by law in accordance with the Information Privacy Principles at Schedule 2 of the <i>Information Act 2002</i> (NT). You have a right to access and correct the information held about you.</p> <p>If you have any queries or concerns please contact Freedom of Information, Department of Corporate and Digital Development on (08) 8999 1793, email <a href="mailto:FOI@nt.gov.au">FOI@nt.gov.au</a> or write to GPO Box 2391, Darwin NT 0801.</p>			

Office use only – TFHC Action Officer			
TMS Client Number		Group Number	
TMS Account Number		Amount to be refunded:	RENT \$
Region			BOND \$
Cost Centre		Standard Class / Tax Code	<input type="checkbox"/> 812112 Y00 (rent) <input type="checkbox"/> 51T005911151 A00 (bond) <input type="checkbox"/> 812116 Y00 (bond loan)
Notes:			
TFHC Delegated Officer – Authorisation			
Name			
Position Title			
Signature		Date	/ /