

**About this form:** This form is for the purpose of refunding overpayment of rates and charges OR transfer of rates payments. The refund will be processed only if the account is in credit, alternatively you may wish to leave the overpayment and have this deducted from your next rate payment. Processing a refund request may take up to 14 calendar days from the date council receives a completed application.

**How to complete this form:**

1. Ensure that all fields have been filled out correctly
2. Please note that fields on this form marked with an \* are mandatory and must be completed before submitting the application.

Part 1: Application Details	
Please select one of the following:	
<input type="checkbox"/>	I am the property owner:
<input type="checkbox"/>	I am the managing / acting agent:
Title:	Given Name*:
Last Name*:	
Business Name:	
Mailing Address*:	
Contact Number*:	
Email Address*:	

Please Select the correct option below:	
<input type="checkbox"/>	I would like to be refunded for the overpayment of my rates (please complete Part 2A)
<input type="checkbox"/>	I would like to transfer the rates payment to another assessment number (Please complete Part 2A + 2B)

Part 2A: Refund Information	
Rates Assessment Number : (for Refund only)	
Property Address*: (for Refund only)	
Refund/Transfer Amount*:	
Reason Refund/Transfer is required*:	

Part 2B: Transfer Information	
Assessment number paid incorrectly to :	Assessment number payment to be transferred to :
Address of Property*:	Address of Property*:

Part 3: Details for Direct Deposit of Refund			
(Required only if Part 2A is selected)			
Refunds will only be credited into a savings or cheque account			
Banking Institution Name*:			
BSB No*:		Bank Account Number*:	
Account Name*:			

Part 4: Original Payment verification check	
To verify the applicant and the method of payment one of the below documents are required. Please note your application will not be processed if these documents are not attached to the application.*	
<input type="checkbox"/>	Copy of Receipt
<input type="checkbox"/>	Copy of Credit Card Statement or Bank Statement including name(s) and address. <b>(Please remove credit card number from statement)</b>

**Privacy Statement**

Your personal information is being collected by Council for the purpose of assessing whether you are entitled to a refund due to overpayment of your Rates. Your information will be accessed by Council Staff, Contracted service providers and will be stored in Council's Customer Database. It will be used to identify you when communicating with Council and for the delivery of services and information. For further information on how your personal information is handled, visit Council's Privacy Policy at:

<https://www.wyndham.vic.gov.au/privacy-policy>

Part 5: Application Declaration		
I declare that I am the ratepayer/ acting agent of the property mentioned in part 2 of this form and the information given on this form is true and correct. I agree with the terms and conditions associated with the refund process		
Applicant Name*	Applicant Signature*	Date*