

Conti & Co Pty Ltd

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## Key deposit refund request

Contact Details:	
Name:	
Address:	
Phone:	
(Home)	(Work) (Mobile)
Email:	
Strata Details:	
Strata Plan:	Unit No:
Strata Fian.	Onic No.
Address of Property:	
ridarioso or i roporty.	
Refund Details:	
Refund amount:	Number of keys/swipes:
Bank Account Holder Name:	
BSB Number: Ba	ink Account Number:
BSB Nulliber. Ba	TIK ACCOUNT NUMBER.
IMPORTANT: If incorrect bank details	are provided, an administration fee of \$38.50 will be deducted from the refund amount
Note: In order to obtain a refu	and, you are required to present a <b>payment receipt</b> and <b>photo identification</b> .
Funds may take 3 – 5 business d	ays to transfer into your account. Please contact our office if there are any issues.
·	
Applicant's Signature:	
(Print Name)	(Signature) (Date)
Office Use Only:	
Receipt Sighted (Y/N):	Amount: \$
Identification Cights J (V/NI)	Evnence Account: 452000
Identification Sighted (Y/N):	Expense Account: 153000
No. of keys/swipes received:	Description: Unit - Refund key deposit
, ,	
(Staff Name)	(Signature) (Date)