

Lessor(s) / Park Operator

Name and address of lessor(s) / park operator to whom the refund should be paid (if applicable).

1 Family Name / Organisation Name

Given Name / Organisation Name continued...

Address

Address continued...

Address continued...

Suburb State Postcode

Email Address

Contact Number

Amount to be paid to Lessor 1 \$

Date of Signature (DD / MM / YYYY)

Signature (please stay inside border)

Payment Method (Indicate) Cheque Direct Credit (Complete below)

Direct Credit Request

BSB Number (six digits) Account Number

Name of Australian bank/building society/credit union

Name of account holder

2 Family Name / Organisation Name

Given Name / Organisation Name continued...

Address

Address continued...

Address continued...

Suburb State Postcode

Email Address

Contact Number

Amount to be paid to Lessor 2 \$

Date of Signature (DD / MM / YYYY)

Signature (please stay inside border)

Payment Method (Indicate) Cheque Direct Credit (Complete below)

Direct Credit Request

BSB Number (six digits) Account Number

Name of Australian bank/building society/credit union

Name of account holder

Please continue on next page

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**IMPORTANT - Do not sign this form until you have read the information on the last page of the form
Do not sign a blank form**



