



## Rates Refund Creditor Details

GYMPIE REGIONAL COUNCIL REQUESTING OFFICER:

SUPPLIER NAME:

PROPERTY ADDRESS:

POSTAL ADDRESS: \_\_\_\_\_

PHONE NO: \_\_\_\_\_ MOBILE NO: \_\_\_\_\_

EMAIL ADDRESS FOR REMITTANCES: \_\_\_\_\_

### ELECTRONIC FUNDS TRANSFER DETAILS

*Please attach a copy of proof of bank details (e.g. bank statement, deposit slip)*

BANK: \_\_\_\_\_ BRANCH: \_\_\_\_\_

BSB: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

NAME OF ACCOUNT HOLDER: \_\_\_\_\_

PROOF OF BANK DETAILS ATTACHED:

### DECLARATION OF APPLICANT

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### Please return completed form to:

Email: [rates@gympie.qld.gov.au](mailto:rates@gympie.qld.gov.au)

or

Rates Department

Gympie Regional Council

PO Box 155, GYMPIE QLD 4570

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