



## Licence/Approval Refund Request

**Postal Address**  
PO Box 159  
Caboolture QLD 4510

**Customer Response Department**  
Ph: 07 3205 0555

**Internet**  
www.moretonbay.qld.gov.au  
council@moretonbay.qld.gov.au

**ABN: 92 967 232 136**

*All requests for refunds are subject to evaluation prior to approval*

### Licensee/Applicant details:

Licensee/Applicant name:   
Postal address:   
Home number:  Mobile:  Work:   
Email address:

### Licence/Approval details:

Licence/Approval number, eg: LI/2020/1234:   
Trading name (if applicable):

### Reason for Refund:

- Business closed                       Overpayment  
 Application withdrawn/cancelled     Change of ownership - licence no longer required  
 Bond release                                 Duplicate payment  
 Other (please specify):

### Proof of payment:

Please provide proof of payment for Council to assess your refund. Your refund will not be processed unless proof of payment is provided. This will include either:

- A copy of receipts issued
- A copy of the bank statement showing the transaction/s **and** account details (BSB, Account number, account name)

Duplicate payments require copies of both payment transactions.

Proof of payment attached:  Receipt/s     Copy of bank statement

Date paid:  Payment method:  BPay     Phone Pay     Customer Service Centre     Post     Online

### Refund details:

Postal address where refund EFT remittance is to be posted:

Where possible Council will reverse the original payment to the bank account from which the payment was made, otherwise a bank transfer will be made to the account details nominated below:

#### Bank account details for EFT refund if applicable:

Bank name:  Account Name:   
BSB:  Account number:

### Importation Information:

All refund requests of annual fees are subject to approval and calculated in accordance with Council's fees and charges. The refund will only be provided to the person who made the payment.

**Refunds may take 30 days to process once all required information has been supplied.**

Signature:  Date:

### Office Use Only

Debtor ID:  Receipt Number:   
Proof of Payment Received:  Yes  No    Doc set ID:   
Amount Paid \$  Pro-rata amount retained \$  **Total Refund amount \$**   
**Bonds only** - site inspection completed & passed. Bond amount retained \$  **Total Bond Refund amount \$**   
 Yes  No - Doc Set ID:  (if applicable)

**Privacy statement:** Moreton Bay City Council is collecting your personal information for the purpose of processing a refund. Council will use your personal information to update Council's customer information records and to contact you about other functions and services of council.