## APPLICATION FOR PAYMENT - REFUND FOR COMMUNITY FACILITES & RECREATION

## **PAYEE DETAILS**

Name or Company

Street number Street name

Suburb Postcode

Contact telephone number Email address

Please note if you are not the payee stated on the receipt, a signed authorisation must be attached signed by the original payee

**EVENT DETAILS** 

Name of venue

Receipt number Booking number e.g. R000056088 e.g. 552558

Event date

## **BANK ACCOUNT DETAILS**

Account name

Council is not liable for lost payments due to incorrect details

BSB number Account number

Signature/s Date

To be completed by the requesting Council officer

A copy of the receipt and/or supporting documents must be attached

I certify that this requisition is in accordance with the Delegations of **Authority** 

OFFICE USE ONLY Amount (Incl.) GST (Y/N) Account TOTAL PAYMENT **Payment** Details Requested by Authorised by Signature Name Position

## CONTACT US

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