

APPLICATION FOR REFUND OF DEPOSIT

POSTER / BANNER

<i>I</i> ,		(FULL NAMES),
hereby apply for a	refund of the deposit in the sum	of R, paid per
receipt	dated	, attached to this application.
· · · ·	r the refund is based on my claim ed all of the Posters / Banners th	
IDENTITY NUMBER	₹:	
STAND NUMBER: _		
POSTAL ADDRESS	:	
TELEPHONE:		
MUNICIPAL SERVIO	CES ACCOUNT(S) :	
to punitive measu terms of Section S	res, civil or criminal sanction of 53 of the Bylaws. I also hereby deposit against any amounts t	that any false statement shall be subjected as the Municipality deems appropriate in authorize the Chief Financial Officer to that may be owing to the Kwa Dukuzo
Yours faithfully,		
SIGNATURE OF A	APPLICANT	DATE
Banking Detail	ls of Applicant	
ACCOUNT HO	OLDER NAME:	
ACCOUNT NU	JMBER:	
NAME OF BA	NK:	
BRANCH COD	DE:	

FOR OFFICIAL USE ONLY

a)) I do hereby certify that all of the Posters / Banners displayed have been removed.			
b)) Authority is hereby given for the refund of the POSTER/BANNER DEPOSIT as requested.			
c)	To Finance Directorate: REFUND %			
	AUTHORIZED OFFICER	DATE		
	APPLICATION No. :			
	FINANCE DIRECTORATE USE ONLY			
	(Tick which is applicable)			
	REFUND	TRANSFER		
	a) Transferred to account(s) number:			
	b) Reasons for Transfer:		_	
			_	