



Shire of Lake Grace

Ph: 08 9890 2500 Fax: 08 9890 2599
1 Bishop Street, Lake Grace, PO Box 50, Lake Grace WA 6353
shire@lakegrace.wa.gov.au

Key Bond Release Form

Full name:			
Organisation: (if applicable)			
Bond to be reimbursed to:	<input type="checkbox"/> Organisation	<input type="checkbox"/> Individual	
Address:			
(used for bond refund cheque)	Suburb:	Postcode:	
Email:			Phone:
Key Hired:			
Date of Hire:			
Bond Amount:	\$		Bond Paid (date):

Please Note: For auditing purposes your bond will be held in a separate Trust Account and can only be released in the form of a non negotiable Trust Cheque made out to the person whose name appears on this form. In the event that the key is not returned, the bond will become non-refundable.

Signature:	Date:
------------	-------

OFFICE USE ONLY

Refund Full Amount	<input type="checkbox"/>	BOND No:	_____
Amount withheld due to:	<input type="checkbox"/> Keys not returned	\$	_____
Authorising Officer:	_____	Signature:	_____
Manager: (if amount to be withheld)	_____	Signature:	_____