

SHIRE OF QUAIRADING BOND FORM

Organisation			
Name			
Address			
Phone			
Email			
Date of Hire		Date of Departure	

BOND FOR: (Please Tick)

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Key | <input type="checkbox"/> Lessor Hall | <input type="checkbox"/> Community Building | <input type="checkbox"/> Town Hall |
| <input type="checkbox"/> Equipment (tables/chairs) | <input type="checkbox"/> Community Bus | <input type="checkbox"/> Portable Toilet | <input type="checkbox"/> Sound/Lighting |
| <input type="checkbox"/> Cabins / Cottage | <input type="checkbox"/> Cat Trap | <input type="checkbox"/> Other _____ | |

BOND

If not held by preauthorisation the bond will be returned into a nominated bank account or by cheque.

Account Name			
BSB		Account Number	

OFFICE USE ONLY

RECEIVING OFFICER						
Date Paid			Receipt Number			
Hire Amount	\$		Bond Amount	\$		
Completed By			<input type="checkbox"/> Hire Agreement Completed <input type="checkbox"/> Entered in Bond Register			
CLEANER						
Additional Cleaning	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Cleaners Signature			
Notes						
ACCOUNTS						
Refund Amount			Bond Retained	Yes / No	Amount	\$
GL Code	6222	GST:	\$ N	Creditor Number		
Completed By			Authorised By			
Date Bond Processed			<input type="checkbox"/> Bond Register Updated			