



Please fax your refund request to (08) 9423 7718

Alternatively, post to: Locked Bag 2, Osborne Park Delivery Centre 6916

### APPLICANT DETAILS

Business name (if applicable):  
 Contact person:  
 Daytime Contact Number:  
 Postal address:  
 Email:

### REFUND DETAILS

Please attach a copy of your receipt and use a separate form for each refund request

Water Corporation Account Number	
Property Address	
Reason For Refund	
Refund Amount	\$

### REFUND METHOD

Electronic Funds Transfer (EFT) Details	Name of Bank, Building Society or Credit Union	
	Name on account	
	BSB Number	
	Account Number	
Refund Cheque Details	Cheque Payable to	
	Post to this Address (or mark 'as above')	

## Refund Request



Refund to Credit Card (same credit card used to make original payment)	Credit Card number	
	Name on Credit Card	
	Expiry Date	

### PRIVACY STATEMENT

*Information collected on this form will be used for the purposes directly related to the service you have requested. Your prior consent will be sought for any other proposed disclosure. Details of our Privacy Policy can be found on our website- [www.watercorporation.com.au](http://www.watercorporation.com.au)*

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