



FORM BTO 3

REQUEST FOR A REFUND ON MUNICIPAL ACCOUNT
NUMBER.....

I/WE.....holder of the above mentioned
account hereby request that the credit on my account be refunded to myself. My banking
details are as follows.

ACCOUNT NAME <i>Bank</i>	
ACCOUNT NUMBER	
BRANCH CODE	
TYPE OF ACCOUNT	

SIGNATURE OF APPLICANT.....

DATE.....

FOR OFFICE USE

I..... CONFIRM THAT ACCOUNT.....
IS IN CREDIT AND THE ACCOUNT HOLDER DOES NOT HAVE ANY OTHER ACCOUNT WITH THE
MUNICIPALITY THAT IS IN DEBIT.

SIGNATURE.....DATE.....

