

Refund Claim Form



Please complete this form and return to your local One Stop Shop

I / We * wish to claim a refund of the accrued funds presently held on the following account, LESS any other liability by Me / Us *deleted as appropriate

Name(s) of Tenant(s)		Pay Ref. No	
Address Refund Relates to		Post Code	
Contact Address		Post Code	
Telephone Number		Email	

Notes

The information contained on this form will only be used in conjunction with the refund process and to ensure your contact details are kept current. For more information please visit:

<https://www.wolverhamptonhomes.org.uk/privacy>

Please ensure that all signatures are present, and all details are correct before returning the completed form to your local One Stop Shop. Wolverhampton Homes take no responsibility for incorrect details or misplaced / undelivered forms.

For third party claimants, Next of Kin, Solicitor, Executive. Please provide: power of attorney, death Certificate, Grant of Probate etc.

If there is any liability, it is normal procedure to deduct **four weeks/a month** payable from the total amount of credit held. This is to prevent your account going into arrears. Any other housing debts owed to the City of Wolverhampton Council, its managing agents, or other partner agency's will be deducted from the amount of credit due.

Following checks for other debts the refund form will be authorised and passed to CoWC Banking and Finance Support for processing, their service standard is to make payment by BACS within 28 days of receipt of the request.

If you are unsure of any of the above notes, please visit: www.wolverhamptonhomes.org.uk/rent-refund

Bank Details

Bank Account No:											Sort Code:			-			-			
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Account Holders Name(s):	
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I / We* the undersigned undertake to indemnify the council against any further claims in respect of this refund

In the case of joint tenancies all tenants must sign the indemnity

Signature of Claimant/s

1)	2)
Date:	