Children's Court
of New South Wales

REQUEST FOR BAIL REFUND

Case Number:	
Name of Applicant	
Address of Applicant:	
Phone Number	
Email Address	

I hereby apply for the

☐ Refund of the amount of $_____ bail deposit.

☐ Refund of securities lodged, namely the following: _____
[Must be collected by security holder or authorised person in writing]

☐ Return of the Passport. *[Must be collected by passport holder or authorised person in writing]*

Lodged by me in respect of the attached bail.

All conditions of the bail have been fully complied with so as to lawfully entitle me to a refund.

I undertake to indemnify the Crown against loss arising from the refund of the deposit to me.

Form of identification produced: _____

PLEASE TICK THE BOX

☐ I request that you forward to me at the above address a cheque for refund of the bail.

☐ I request that you deposit the funds to my account of:
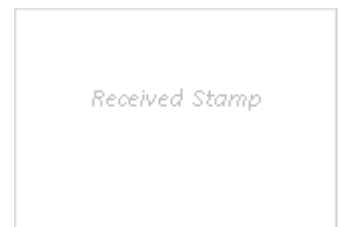
Account Name: _____

Bank Name: _____

Branch Name: _____

BSB No.: _____

Account No.: _____

Applicant's Name and Signature: _____

Date: _____

Received Stamp

If third party is to receive the refund (e.g. solicitor's trust account), surety is to provide written authorisation for approval.

OFFICE ACTION ONLY

Case finalised/bail revoked or dispensed with on: _____ at _____ Court.

Bail Undertaking forfeited: YES / NO

Signature compared with Bail Undertaking   YES / NO (Copy attached)

Receipt attached: YES / NO

Identification Produced: YES / NO (Copy attached)

Checking Officer Name: _____

Signature: _____

Date: _____

OFFICE ACTION ONLY – <u>ACCOUNTS</u>

Disbursement id: _____

Authorised on: _____

Authorised Officer Name: _____

Signature: _____

Approval of Registrar where bail refund is $5,000.00 and over:
Signature: Date:

<div align="center">

CERTIFICATE

</div>

I confirm the above security/passport has been returned to the Applicant.

Officer's Name and Signature: _____

Date: _____

I acknowledge receipt of the above security/passport.

Applicant's Name and Signature: _____

Date: _____