## **Housing Rent Refund Application**

Please return the completed form to: Directorate of Housing and Investment, City of Lincoln Council, City Hall, Beaumont Fee, Lincoln, LN1 1DE



LINT IDL						
Application for refund of credit balances						
This application refers to a cre	dit bala <u>nce of: £</u>					
	(s) of:					
Rent account address:						
Rent (tenancy) reference numb						
If you have any queries please telephone (01522) 873224						
To be co	ompleted by the applicant (s)					
I (full name)						
of (current address)						
	Doct on do.					
Phone number(s)						
hereby make an application for	a rent refund of £					
I hereby certify that I am the perinformation is correct.	erson entitled to make this claim for a refund and the					
If we we have any debte with C	itu of Lincoln Council we will up this availt to now					
If you have any debts with City of Lincoln Council, we will use this credit to pay them. If you do not want us to do this please tick here.						
Signed:	Date:					
Important:	this section must be completed					
	y into your bank or building society account, please					
	check that your account can accept payment this way.  y account, please provide your roll number also.					
Name of Bank/Building Societ						
Sort code						
Account number						
Account name(s)						
Signature(s)						
Roll number (building society only)						

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