



Tenancies Branch
Level 1, 91-97 Grenfell Street, ADELAIDE SA 5000 Office Hours: 8.30 am - 5 pm
GPO Box 965, ADELAIDE SA 5001
Telephone: 8204 9555 (Bonds)
8204 9544 (Tenancy advice)
www.ocba.sa.gov.au

SECURITY BOND NO

Grid for Security Bond Number

OFFICE USE ONLY

LODGEMENT OF SECURITY BOND FORM

PLEASE COMPLETE FORM IN CLEAR PRINT USING BLUE OR BLACK PEN

IMPORTANT

Landlords must lodge this form within 7 days and registered agents within 30 days of receipt of the full or any part payment of bond moneys or DDR details. If the tenant does not sign this form, the bond must still be lodged within the required time frame.

A separate form must be lodged for each tenancy.

Cheques should be made payable to the "Residential Tenancies Fund".

Have you given a copy of the information brochure and inspection sheet to the tenant?

Please submit original forms only - faxes or e-mails not accepted

Address of rental premises (USE BLOCK LETTERS)
Unit/apartment no: Street no:
Street name:
Suburb: Postcode:
Weekly rental: \$ No of bedrooms:
Amount of bond: \$ Part bond payment? YES NO
Tenancy commenced: Bond /DDR details received by landlord/agent
PLEASE ENSURE THAT ALL DETAILS WITHIN THIS BOX ARE COMPLETED

Tenant details (USE BLOCK LETTERS)
Surname First Names Contact phone number Work Home
Email address (to receive lodgement receipt & bond refund details)

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Tenant details (USE BLOCK LETTERS)
Surname First Names Contact phone number Work Home
Email address (to receive lodgement receipt & bond refund details)

Landlord details (USE BLOCK LETTERS)
Surname First Names Contact phone number Work Home
Address Postcode Mobile Fax
Email address (to receive lodgement receipt & bond refund details)

Agent details (USE BLOCK LETTERS)
RLA Contact phone number Work
Address Postcode Fax Mobile

Agent details (USE BLOCK LETTERS)
RLA Contact phone number Work
Address Postcode Fax Mobile

Agent details (USE BLOCK LETTERS)
RLA Contact phone number Work
Address Postcode Fax Mobile

Agent details (USE BLOCK LETTERS)
RLA Contact phone number Work
Address Postcode Fax Mobile

Signatures (PLEASE SIGN IN BLUE INK)
Signature of tenant/s Date:
Signature of landlord/agent Date:



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DIRECT DEBIT REQUEST (DDR)

THIS IS A **ONCE-OFF** AUTHORITY ONLY

Please use **BLOCK LETTERS**.

Customer Name: I / We
(Surname) (Given names)

authorise **OCBA – Tenancies, APCA User ID Number 079565**,
to arrange for funds to be debited from my/our account to the value of \$_____ (*amount of bond*) at the financial institution identified below, for the purpose of bond lodgement.

Note: Please ensure that value (amount of bond) is completed.

Address of rented premises:

Details of the account to be debited

(All account details must be supplied)

NB: The bank account details must match the parties of the bond. We cannot withdraw money from a third party account.

Name and branch of financial institution:

BSB number: | | | - | | | This **must** be 6 digits

Account number: | | | | | | | | | Can not be more than 9 characters

Note: Please ensure the account and BSB number that you are providing are correct. Direct debiting is not available on a full range of accounts and if you are unsure please clarify with your financial institution. Credit union cheques may not show their own BSB number. Check with the credit union for the correct BSB number to use for direct debit.

Account name:

Customer signature(s):
(all signatories may be required to sign on joint accounts)

Date:/...../.....

ATTACH THIS FORM SECURELY TO THE BOND LODGEMENT FORM

OFFICE USE ONLY

Bond No: | | | | | | | | |

Date processed:/...../.....

Officer's name:

DDR service agreement for individuals can be viewed at www.ocba.sa.gov.au