PEC Utility Management (Pty) Ltd

Company Reg No 2004/032820/07

◆ 3 Tetra Street | Triangle Farm | Stikland | Cape Town
PO Box 3157 | Durbanville | 7551

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REFUND REQUEST - RESIDENTIAL

Please complete and submit this application during office hours, together with clear copies of the following:

• Copy of account holder's ID or passport

Signature

 A cancelled cheque / copy of blacked-out bank statement / bank confirmation letter (for refund purposes) Documents can be faxed or emailed to: clientservicescpt@pecgroup.co.za or (f) 021 949 0241. Kindly confirm receipt thereof.

OFFICE USE New Account No	Primary BP No FB RC
PEC Reference No	or E-Wallet No
Building Name	
Unit No	
Tenant Status	Owner Tenant
Title	Mr Mrs Dr Prof Initials
Full Names	
Surname	
Identification Type	RSA ID Passport Temporary ID (E.G. Refugee ID)
Identification No	Identification expiry date
Country of Issue	
Email Address	
Landline No	Cell No
BANKING DETAILS	
Name of Bank	
Branch Name	Branch Code
Name of Account Holder	
Account Number	Type of Account Current Savings
REASON FOR REFUND	
Credit balance on closed account	(Refund will take place during the Service Provider's next credit run after requested documentation have been received by the Service Provider)
Incorrect/over payment made to PEC	(A R 65.00 administration fee will be deducted from the incorrect/over amount and the balance thereof will be refunded between 5 and 7 business days after requested documentation have been received by the Service Provider)
Credit balance in E-Wallet account	(Refund will take place between 5 and 7 business days after requested documentation have been received by the Service Provider)
TERMS & CONDITIONS	
 I/We hereby confirm that I have the authority to complete this request, and certify that the information provided in this form is correct. I/We hereby indemnify PEC Utility Management (Pty) Ltd, it's owners and staff from any form of liability that may arise as a result of incorrect information provided by me/us. I/We have read and understood the contents of this document and agree to its Terms & Conditions. 	
Signed on this (day) of	(month) 2 0 (year)

Full Names & Surname (PLEASE PRINT)