

RESIDENTIAL TENANCIES BOND AUTHORITY

Telephone: 1300 137 164

Mail: Locked Bag 007 Wendouree Vic 3355

Web: rentalbonds.vic.gov.au

STATUTORY DECLARATION BY LEGAL REPRESENTATIVE / NEXT OF KIN

This Statutory Declaration is to be used where a party to a residential bond is deceased. The completed Declaration is to be attached to a Bond Claim or Transfer form which must also be signed. If you wish to make a statutory declaration remotely, please see the instructions at <https://www.justice.vic.gov.au/statdecs#form>

I, _____
Print the name of the person who will sign the Bond Claim or Transfer form

of, _____
Print the address of the person who will sign the Bond Claim or Transfer form Telephone _____

make the following statutory declaration under the *Oaths and Affirmations Act 2018* :

1. I am the Legal Representative / Next of Kin (*delete one*) of the deceased person identified in the attached death certificate/proof of death; and
2. I am entitled to act on behalf of the estate of the deceased person in relation to the bond held by the Residential Tenancies Bond Authority for the property identified on the attached Bond Claim or Transfer form.

Form Number of attached form:	
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3. I agree to indemnify the RTBA against any loss or damage which may arise from the RTBA relying upon this Declaration in making the bond repayment or transfer requested.
4. I understand that Repayment of the bond will be made to the bank account provided on bond claim form which is signed by me. If bank account details are not provided the RTBA will hold the money until valid bank details are provided via a Retained Repayment Request. A search for Retained Repayments is available on RTBA Online (rentalbonds.vic.gov.au) using the 'Find outstanding bond repayment' menu item.

I acknowledge that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

Signature of person making the Declaration: (to be signed in front of an authorised witness*)	
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Declared at _____, in the state of Victoria, on day _____ month _____ year _____

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration:

Signature of Authorised witness*:	
Print name of Authorised witness:	
Address of Authorised witness:	
Occupation/Status of Authorised witness:	
Date witnessed:	
* A person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration.	