

# RESIDENTIAL TENANCIES BOND AUTHORITY

Telephone: 1300 137 164

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[www.rtba.vic.gov.au](http://www.rtba.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.

I, \_\_\_\_\_  
*Print the name of the person who will sign the Bond Claim or Transfer form*

of \_\_\_\_\_ Telephone: \_\_\_\_\_  
*Print the address of the person who will sign the Bond Claim or Transfer form*

in the State of Victoria do solemnly and sincerely declare that:

1. I am the Legal Representative / Next of Kin (delete one) of the deceased person identified in the attached death certificate; 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:**

(insert number from bottom right of form)

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.

**Only complete item 4 where a bond claim is being made.**

4. I request that repayment of the bond be made by cheque to the following person and address: *(If a direct credit repayment is required, please provide your bank account details on the Bond Claim form. If account details are altered or the repayment fails, the repayment will be sent by cheque to the address below).*

<b>Name of payee:</b>		
<b>Postal address:</b>		

(Post code)

**I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the penalties of perjury.**

Signature of person making the Declaration:  
(to be signed in front of an authorised witness\*)

Declared at \_\_\_\_\_ in the State of Victoria, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

Before me:

Signature of authorised witness*:	
Print name of Authorised witness:	
Address of Authorised witness:	
Occupation/Status of Authorised witness:	

\* Section 107A of the Evidence (Miscellaneous Provisions) Act 1958 (Vic.) provides a list of persons who may witness the signing of a statutory declaration. This list includes: Justice of the Peace, Barrister or Solicitor, Court Registrar, Police Officer, current or former Member of Victorian or Commonwealth Parliament, Municipal Councillor, Medical or Veterinary Practitioner, Pharmacist, Dentist, School Principal, Bank or Building Society Manager, Minister of Religion.