

Authorisation to transfer account details and to open an account

To assist us with the processing of your application, please sign below and return to: GPO Box 5342 Melbourne VIC 3001



EXISTING ACCOUNT DETAILS:

Name of existing account:

Account Number of existing account:

Card providers Name (Name of existing card type):

I authorise you to transfer the details of the above-nominated account to the new account as detailed below:

NEW ACCOUNT TO BE CREATED/TRANSFERRED TO:

Name of new account to be created

New Account Cardprovider name

Confirmation declaration:

- I have read the Terms and Conditions relating to the operation of the new account which I/we am/are requesting be opened.
- The above information is true and correct.
- I am an Authorised Signatory of the applicant
- I/We agree to operate the account in accordance with the Conditions of Use for this account and acknowledge that the use of this account means that I/we have received and accepted the Conditions of Use
- You may produce this authorisation or a copy or reproduction of it as evidence of this authorisation to transfer and open this new account

I/We have:

a) read and understood the above declaration; and

b) being the person(s) named as the Applicant/Customer/Account Holder or where the Applicant/Customer/Account Holder is a corporation, being the directors of the Applicant/Customer/Account Holder as specified in this application acknowledge being authorised person to sign this application:

Authorised Signatory:

Date:

Please Print Name and Position Held:

