

Reduce Advance Repayments (Capitalisation).

Please allow 5 business days for this request to be processed.

Date Loan account number

Borrower(s) details.

Name (1) <input type="text"/>	Phone (H) (<input type="text"/>) <input type="text"/>	Phone (W) (<input type="text"/>) <input type="text"/>
Name (2) <input type="text"/>	Phone (H) (<input type="text"/>) <input type="text"/>	Phone (W) (<input type="text"/>) <input type="text"/>
Name (3) <input type="text"/>	Phone (H) (<input type="text"/>) <input type="text"/>	Phone (W) (<input type="text"/>) <input type="text"/>
Name (4) <input type="text"/>	Phone (H) (<input type="text"/>) <input type="text"/>	Phone (W) (<input type="text"/>) <input type="text"/>

Privacy Statement.

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at banksa.com.au/privacy/privacy-statement or by calling us on 13 13 76. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information but, if you don't, we may not be able to process your application or request.

Request from Borrower.

All borrowers to sign

- I request to clear all advance repayments on my Home Loan. By making this request I accept that I will not be able to redraw these funds in the future.
- OR**
- I request to clear \$ from the advance repayments on my Home Loan. By making this request I accept that I will not be able to redraw these funds in the future.
- OR**
- I request to clear advance repayments on my Home Loan so that my monthly repayment amount is reduced to \$. By making this request I accept that I will not be able to redraw the advanced repayments.

Name of Borrower <input type="text"/>	Signature <input type="text" value="X"/>	Date <input type="text" value="/ /"/>
Name of Borrower <input type="text"/>	Signature <input type="text" value="X"/>	Date <input type="text" value="/ /"/>
Name of Borrower <input type="text"/>	Signature <input type="text" value="X"/>	Date <input type="text" value="/ /"/>
Name of Borrower <input type="text"/>	Signature <input type="text" value="X"/>	Date <input type="text" value="/ /"/>

Request from Borrower. (continued)

Name of Company Borrower *(Residential Loans Only)*

Signature authorised person

Signature authorised person

Date

Bank use only.

Branch name

Employee name and no.

Please fax to (02) 9055 1963 or post to Loans Administration, Locked Bag 1, Kogarah NSW 1485.