



**4. Authorisation request.**

I/We authorise and request that you transfer funds when I/we direct from my/our account(s) to the third party Payee account(s) set out above. You may refuse to accede to this request at any time. In particular, the transfer of funds will only be made if there are sufficient cleared funds in my/our account on the day of transfer. I/We understand that when I/we use Internet/Phone Banking including to transfer funds from my/our account(s) to a nominated account, I/we will be bound by Bank Accounts Terms and Conditions and General Information (and any variation of them). In particular and without limiting the above, I/we acknowledge that you are not liable for any loss or damage if a transfer of funds is not affected or is delayed for any reason. I/We also acknowledge that you may impose a fee on any transfer made pursuant to this request.

Common Seal  
(if applicable)

**Account Holder/Director/Secretary**

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

**Branch use only.**

Signature verified by

Name \_\_\_\_\_

Employee Number 

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**Head office use only.**

Input by

Name \_\_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Delivery box info \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Deliver to your local Branch.**

**Post to:      Customer Administration,  
                  1 King Street  
                  Concord West NSW 2138**

**Fax:            02 9995 8307**