



To finalise your Account please review your information below, sign, attach your Proof Of Ownership and return to:



Bank of Melbourne Processing
PO BOX 1286
Melbourne VIC 8060



Fax to
(03) 9982 4180

Account Number

Application Date

 / /

Applicant 1

Name

Home address (P.O. Box not accepted)

Suburb

State

Postcode

Country

Postal address (Write "As Above" if same as Home address)

Suburb

State

Postcode

Country

Phone number

 ()

Business number

 ()

Mobile phone number

Date of Birth

 / /

Occupation

Tax File Number

Password

**Applicant 2
(if applicable)**

Name

Home address (P.O. Box not accepted)

Suburb

State

Postcode

Country

Postal address (Write "As Above" if same as Home address)

Suburb

State

Postcode

Country

Phone number

 ()

Business number

 ()

Mobile phone number

Date of Birth

 / /

Occupation

Tax File Number

Password



Linked Everyday Banking Account, Opening Deposit and Automatic Savings Plan (Direct Debit Request*)	Financial Institution			
	Address (P.O. Box not accepted)			
	Suburb	State	Postcode	Country
	Account Holder(s)			
	BSB Number		Account Number	
	Opening Deposit \$	Frequency	Regular Deposit Amount \$	Start Date / /

Please ensure you have sufficient funds in your Linked Everyday Banking Account to meet your opening deposit and/or savings plan deductions (as required).

Proof of Ownership For security reasons, prior to linking your non-Bank of Melbourne Everyday Banking Account to your Direct Saver we require proof that the Everyday Banking Account belongs to you.

- Please provide a copy of your Linked Everyday Banking Account Statement. (Internet Banking copies not accepted.)
- Your Everyday Banking Account must be in the same name(s) and address as the Direct Saver Account. The Statement must be no more than 6 months old.
- If the address on the statement is not the same as the home address of at least one of the applicants listed above, please provide a copy of either a driver's licence, a utility bill, a rates notice or an Australian Tax Office Notice that confirms the home address of one of the applicants. (Please note that if you provide an original, it will not be returned.)
- If you are a non-Australian resident, please provide certified copies of the above.

Signatures (all parties to sign) *By signing this document, I/we authorise Bank of Melbourne - A Division of Westpac Banking Corporation ABN 33 007 457 AFSL 233714 ACL 233714 - Debit User Number 420369 to debit my/our Linked Everyday Banking Account, with any amount, through the Direct Debit System, I/we instruct you to credit my/our Direct Saver Account and any amount payable by me/us under the Direct Saver Account Terms and Conditions. This authority is to remain in force until further notice.

I/We declare that all applicants are residents of Australia. (If not, please cross out.) Change of Australian resident status requires notification to the Bank in writing within seven days. I/We have read the Terms and Conditions applying to this account and agree to be bound by them and any variation of them.

Applicant 1

Applicant 2

Date
/ /

Date
/ /