



Send to Bank of Melbourne – Business Banking Administration, Reply Paid 1286, Melbourne VIC 8060  
Fax: (03) 9982 4183.

**STEP 1.** DIY Super Direct Saver Account Number

**Account Details**

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**STEP 2.** Name of Trustees *(Include title, first and second names)*

**Trust Details**

Name of Trust

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**Principal trust address** *(PO Box not accepted)*

Unit number      Street number      Street name

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Suburb      State      Postcode

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Phone number – business

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**STEP 3.** I/We direct Bank of Melbourne to close the above DIY Super Direct Saver account and transfer any outstanding balance in the account to the Linked Everyday Banking Account for the account.  
**Declarations** (Transfers are only available if the Linked Account is with Bank of Melbourne. If the Linked Account is held with an external financial institution you will need to reduce your DIY Super Direct Saver Account balance to \$0, prior to Account closure.)

**Who can approve and sign this form?**  
**Trusts:** All trustees to sign.  
**Company Trustee:** Two directors OR a director and company secretary to sign.  
**Sole Director Company Trustee:** Sole director/secretary to sign.

**Declarations:**

- In the case of sole director company trustee – I am the sole director and sole secretary and have full power and authority of the company to give the direction in this form.
- In the case of a company trustee – either I am a director or company secretary of the company and have full power and authority of the company to give the direction in this form.
- In the case of trusts – I am/We are/The company is the only trustee(s) of the trust and I/we/the company has/have full power and authority to give the direction in this form.

1.	Name <i>(include title and first and second names)</i> _____ Position _____ Date ____/____/____	Signature^ _____ <b>X</b>
2.	Name <i>(include title and first and second names)</i> _____ Position _____ Date ____/____/____	Signature^ _____ <b>X</b>
3.	Name <i>(include title and first and second names)</i> _____ Position _____ Date ____/____/____	Signature^ _____ <b>X</b>
4.	Name <i>(include title and first and second names)</i> _____ Position _____ Date ____/____/____	Signature^ _____ <b>X</b>

^ Executed in accordance with section 127 of the Corporations Act 2001 (C'wlth) by authority of its directors.