

Request to amend account details on your merchant facility.

Please complete this form if you would like to amend details for debit and/or credit accounts using the direct entry system.

Note: If the change is due to a change in ownership, a new merchant facility must be established. Please phone Merchant Business Solutions sales on 1300 603 266.

	Bank of Melbourne Merchant ID		
Section 1 – Your merchant details.			
Full/Legal Entity name			
Trading address			
		State	Postcode
ABN/ACN (if applicable)			
Contact name	Contact phone number		
Contact email address			

Section 2 – Direct Debit request and authority to debit.

I/We authorise and request Bank of Melbourne (the User) to:

- debit amounts payable by me to Bank of Melbourne, or
- credit amounts payable to me by Bank of Melbourne, under the agreement relating to my/our merchant facility for fees, chargebacks, corrections and settlements. This debit or credit charge will be arranged by Bank of Melbourne through the following debit user numbers: 161505, 161757, 161738, 029590, 004434, 161430, 161667, 161499 161666, 055489, 106600, 000439 and 475577 and will be made through the Bulk Electronic Clearing System Framework (BECS) from your nominated account(s) and subject to the terms and conditions of the Direct Debit Request Service Agreement, available on bankofmelbourne.com.au/merchant-terms.

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Section 2 – Direct Debit request and authority to debit (continued).
Amount of debit.
Any amount Bank of Melbourne has deemed payable by you.
Account type.
Which account(s) would you like to amend:
☐ Billing account
Settlement and Chargeback account
Note: If you tick multiple options and do not supply separate account details the provided details will be used across all account(s) selections. If any accounts are non-Bank of Melbourne accounts, please provide a recent statement or proof of account from your financial institution. The account you nominate for chargebacks or billings must not be an account in which you are required to hold or deposit money on behalf of an individual or business to fulfil your legal obligations, including but not limited to an account for controlled money, trust money, a project trust, a retention trust, or a security deposit. Billing account. Name and address of financial institution at which your account is held Name of account to be debited or credited (as the case may be)
BSB number Account number
Section 3 – Settlement and Chargeback account.
Please complete this section only if you would like Bank of Melbourne to credit or debit amounts to settle transactions and chargebacks processed as part of the merchant facility to a different account specified in Section 2. I/We instruct Bank of Melbourne to credit or debit the account described below with amounts to settle transactions and
chargebacks processed as part of the merchant facility.
Settlement account.
Please note: In some instances it is a Bank of Melbourne requirement of the merchant facility that the account for settlement is a Bank of Melbourne account. Should your facility fall into this category, a request to change to a non-Bank of Melbourne account will be declined.
Name and address of financial institution at which your account is held

Section 3 – Settlement and Cl	hargeback account (continued).	
Name of account to be debited or cr	redited (as the case may be)	
BSB number	Account number	
Section 4 – Privacy Statement	t.	
with our Privacy Statement which is 13 22 66. Our Privacy Statement al	s available at bankofmelbourne.com.au/priv lso provides information about how you can to provide us with any personal information	collected, used and disclosed by us in accordance vacy/privacy-statement or by calling us on access and correct your personal information, and or credit information but, if you don't, we may not be
Section 5 – Your authorisation	ı .	
	irector and the Company Secretary. If signed	ned on behalf of a Company, this form is to be signed d on behalf of all other types of organisations, the
By signing and/or providing us with	a valid instruction in respect to your Direct	Debit Request you confirm that:
• you are authorised to operate the		
• you have understood and agreed Service Agreement.	to the terms and conditions set out in this Di	irect Debit Request and in your Direct Debit Request
Name		Signature
		X
Name		Signature
		Y
		^
Name		Signature
		X
		/
Name		Signature
		X
Date		/ *
/ /		

Please sign this form and email to $\underline{merchant documents} \underline{\texttt{@bankofmelbourne.com.au}}$

OR

Mail to: Merchant Business Solutions, GPO Box 18, Sydney NSW 2001

Request to amend account details on your merchant facility.
Accessibility support.
f you are deaf, hard of hearing, or have speech/communication difficulty, you can message us within the Bank of Melbourne App or communicate with us using the <u>National Relay Service</u> .

If English is not your preferred language, contact us and a banker can arrange a language interpreter.

Visit <u>Bank of Melbourne Accessibility</u> for further information on our more accessible products and services for people with disability, who are neurodivergent or where English is not your preferred language.