



Deliver to your local Branch. Customer Administration, Level 8, 530 Collins Street, Melbourne VIC 3000 Fax: 03 9982 4117

Please use the relevant sections of this form if you would like to add, amend, remove or increase the limit of your third party Payee Account(s). Privacy laws protect your privacy. To read our policy "Protecting Your Privacy", go to our website bankofmelbourne.com.au, phone 13 22 66 or ask at a branch to receive a copy. This request may take up to two working days to be processed.

Date: / /

CUSTOMER DETAILS

Internet and Phone Banking Card/Access No. Card Issue No* Customer Name Address Telephone Numbers E-mail Address

WOULD YOU LIKE TO INCREASE THE DAILY LIMIT OF THE BELOW PAYEE ACCOUNT(S) (please tick) Complete Section 1 and 4

1 ADD PAYEE ACCOUNT(S) TO INTERNET AND PHONE BANKING Complete and go to Section 4

You will need details of the Payee account including BSB Number, Account Number and Account Name. You should obtain these details and permission from the Payee first. Please do not provide your own account details.

Table with 4 columns: BSB No., Account Number, Account Name, Bank/Branch. Two rows for adding payee accounts.

2 AMEND THE FOLLOWING PAYEE ACCOUNT(S) Complete and go to Section 4

Table with 4 columns: BSB No., Account Number, Account Name, Bank/Branch. Two columns: OLD ACCOUNT DETAILS, NEW ACCOUNT DETAILS.

3 REMOVE THE FOLLOWING PAYEE ACCOUNT(S) Complete and go to Section 4

Table with 4 columns: BSB No., Account Number, Bank/Branch, Account Name. Details of Payee A/C to be cancelled.

I/We request that you no longer allow me/us to transfer funds from my/our account(s) to the third party account(s) set out above. Account Holder/Director/Secretary

Name (please print) Signature



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 of Melbourne's Banking Services Terms and Conditions (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.

Account Holder/Director/Secretary

Name (please print) Signature



BRANCH USE ONLY Sig Verified by: Signature Name Employee Number Is the customer registered for Phone Banking? H/OFFICE USE ONLY Input by: (print name) Date

Delivery box info