

## 1. CLIENT DETAILS

Account name

Client account number

## 2. APPLICATION'S AUTHORITY

I/We request ANZ (User ID number 143922) to arrange the following amounts to be debited from my/our account detailed above:

Monthly interest payable in relation to the above facility; OR

The amount of \$  monthly, commencing the first working day of the month after the account is drawn.

I/We acknowledge that I/we have received a copy of the ANZ Direct Debit Request Customer Service Agreement included in the ANZ Investment Lending Terms and Conditions and understand that the direct debit arrangement is governed by its terms and conditions.

### ANZ Direct Debit Request – Customer Service Agreement

#### Our commitment to you.

We will:

- (a) arrange for funds to be debited from your account as authorised in the direct debit request;
- (b) give you at least 14 days' written notice before changing the terms of any direct debit drawing arrangement ("the Direct Debit Arrangement"), unless the changes are made at your request; and
- (c) keep information pertaining to your Nominated Account at the financial institution private and confidential, unless this information is required by us to investigate a claim made on us relating to an alleged incorrect or wrongful debt, or as otherwise required by law.

If the due date falls on a non-Business Day, we will draw the amount on the next Business Day. We reserve the right to cancel the Direct Debit Arrangement if three or more drawings are returned unpaid by your nominated Financial Institution and to arrange with you an alternate payment method.

#### Your rights.

You may terminate the Direct Debit Arrangement or stop payment of a drawing under the Direct Debit Arrangement at any time by giving written notice directly to us, or through your nominated Financial Institution. Notification of your intention to terminate the Direct Debit Drawing Arrangements must be received at least two Business Days prior to the due date.

Where you consider that a drawing has been initiated incorrectly you may take the matter up directly with us on 1800 639 330, or lodge a Direct Debit Claim through your nominated Financial Institution.

It is your responsibility to:

- (a) ensure your Nominated Account can accept direct debits (this may not be available on all accounts, please check with your Financial Institution);
- (b) complete your Nominated Account details directly from a recent account statement from your Financial Institution;
- (c) ensure that the authorisation given to draw on the Nominated Account is identical to the account signing instruction held by the Financial Institution where the account is based;
- (d) ensure that sufficient clear funds are available in the Nominated Account to meet a drawing on its due date;
- (e) advise us if the Nominated Account is transferred or closed; and
- (f) arrange with us a suitable alternate payment method if the Direct Debit Arrangements are cancelled either by yourselves or the nominated Financial Institution.

# ANZ INVESTMENT LENDING DIRECT DEBIT REQUEST

## 3. BANK ACCOUNT DETAILS

Account name

BSB number

Account number

Name of financial institution where the account is held

Please provide a page from your bank statement so we can verify your bank details. The documents must clearly show the BSB and Account Number. (Not required if the account is held with ANZ).

Note:

- Direct Debiting is not available on the full range of accounts. If in doubt, please refer to your financial institution.
- We will only accept an online statement if it has been stamped by a branch or it contains all the relevant details (such as the account name and number) on the same page.
- A copy of your bank statement is not required if the new account is an ANZ bank account.

## 4. AUTHORISATION

All Individual Trustees OR all Trustees for a Minor OR two Directors OR one Director and one Company Secretary must sign this application.

### Client/Director/Trustee 1

Name

Signature

Date

### Client/Director/Trustee 3

Name

Signature

Date

### Client/Director/Trustee 2

Name

Signature

Date

### Director/Trustee 4


Name

Signature


Date

Complete and return this form to:

 **Mail:** ANZ Investment Lending  
Reply Paid 4338, Melbourne VIC 8060  
(no stamp required)

 **Email:** [investmentsupportmelbourne@anz.com](mailto:investmentsupportmelbourne@anz.com)

Contact us:

 **Phone:** 1800 639 330  
8am to 6pm (Sydney/Melbourne time)  
ASX trading days