

# ANZ V2 PLUS Maintenance Request



Complete all appropriate sections and fax to the V2 PLUS Service Centre on:

Fax: 1800 671 800

All requests must be signed.  
Unsigned requests will not be processed and will be returned to you.

Date:

Authorised contact name:

Contact number:

Intermediary number:

## 1. ADD NEW SIGNATORY

Full name

Is the new signatory an existing ANZ Customer?  Yes  No

If **yes**, please list current ANZ account number

If **no**, you will need to visit an ANZ branch to verify your details

Amendments to signing arrangements

All parties to sign jointly

Either party to sign

Other (please provide details)

## 2. REMOVE SIGNATORY

Full name

## 3. SIGNATURE(S)

New signatory

Customer's full name

Customer's signature

Date (DD/MM/YYYY)

Customer's full name

Customer's signature

Date (DD/MM/YYYY)

Customer's full name

Customer's signature

Date (DD/MM/YYYY)

## Important information

This facsimile/document contains information that is confidential and which may be legally privileged. If you are not the intended recipient, you must not read, use, distribute or copy this facsimile/document. If you are not the intended recipient, please notify us immediately on 13 28 33 and return the original facsimile/document to us by mail at our expense. Thank you.