Signatory application
Personal accounts

Bank Australia

Customer name

Customer number

◯ Remove signatory ◯ Add signatory

Note: Signatories must have previously completed signatory 'identification verification' with Bank Australia, as per Government requirements, otherwise they must be completed and included with this application.

Remove signatory/ies

Remove full name

Customer number

From the following account/s

◯ All accounts ◯ Other (please specify)

Remove full name

Customer number

From the following account/s

◯ All accounts ◯ Other (please specify)

Add signatory/ies

Signatory 1

Add signatory to

◯ All accounts ◯ Other (please specify)

Title | Given names | Surname

Customer number | Date of birth (/ /)

Telephone | Work phone | Mobile phone

Email | Drivers licence number

Residential address | Postcode

Do you require Internet Banking? ◯ Yes ◯ No Internet banking limit

Do you require a Visa debit card? ◯ Yes ◯ No

Do you believe you are a PEP?* ◯ Yes ◯ No

Signature

Please be aware that we require a physical signature on this form, once completed print off and sign before sending.

* Politically exposed persons (PEPs) are individuals who occupy a prominent public position or functions in a government body or international organisation, both within and outside Australia. This definition also extends to their immediate family members and close associates.

Signatory 2

Add signatory to

◯ All accounts ◯ Other (please specify)

Title | Given names | Surname

Customer number | Date of birth (/ /)

Telephone | Work phone | Mobile phone

Email | Drivers licence number

Residential address | Postcode

Do you require Internet Banking? ◯ Yes ◯ No Internet banking limit

Do you require a Visa debit card? ◯ Yes ◯ No

Do you believe you are a PEP?* ◯ Yes ◯ No

Signature

Please be aware that we require a physical signature on this form, once completed print off and sign before sending.

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Method of operation

◯ Any signatory to operate ◯ All must sign At least ☐ must sign

1. I/We request that the person named in this application become a signatory or be removed as a signatory in accordance with the instructions completed on this application. If this is a new signatory, they may deposit or withdraw and obtain access to any prearranged continuing credit arrangement and in accordance with the Privacy Act (1988) may seek and obtain information relating to this account.
2. I/We indemnify Bank Australia against any claim which may arise from those acts of an authorised signatory which are within the terms of this authority.
3. I/We agree to pay all charges required by Bank Australia in accordance with the Corporations Law.
4. I/We have read the Account and Access Facility Conditions of Use and agree to be bound by them.
5. I/We have also read the Bank Australia Privacy Notification and consent to the contents therein.

Must be signed by all account owners

Signature

Date / /

Signature

Date / /

Please be aware that we require a physical signature on this form, once completed print off and sign before sending.

Bank Australia use only

◯ Verified signatures ◯ Signatory loaded ◯ Relationship linked

Operator number and initials

Date / /

Visit us at your nearest branch
bankaust.com.au/support/branches

Mailing something?
7-9 Seymour St, Traralgon VIC 3844

Talk to someone
132 888

Bank Australia Limited ABN 21 087 651 607 AFSL/Australian Credit Licence Number 238431