

Authorised Signatory Form



St.George Bank - A Division of Westpac Banking Corporation ABN 33 007 457 141 AFSL 233714

Complete this form:

- to give a person other than your adviser the authority to act on your existing margin lending facility in all matters as if they were you (including but not limited to increasing the loan, buying and selling investments and changing your contact details, but excluding the receipt of margin calls on your behalf.) Your nominated authorised signatory must be an Australian resident for tax purposes and reside in Australia; or
- if you wish to change/revoke this authority.

Section 1
Borrower(s)
Details

Name of borrower(s) on the St.George Margin Lending Facility

Borrower(s) Client Reference Number

Section 2
Authorised
Signatory
Request

I/We request you to *(Please tick (✓) one)*

- Add an authorised signatory to my/our margin loan account
- Change the authorised signatory on my/our margin loan account
- Remove the existing authorised signatory from my/our margin loan account

Section 3
Existing
Authorised
Signatory
Details (if any)

Name of authorised signatory

Relationship to borrower(s)

Section 4
New Authorised
Signatory
Details

Please provide us with a copy of the authorised signatory's identification as per the Proof of Identity Requirements.

Name of Authorised Signatory

Title

Surname

Given Name(s) in full

Date of Birth

____ / ____ / ____

Residential address - *PO Box not accepted*

Suburb

State

Postcode

Country

Phone number

Fax number

Mobile phone number

Email address

Relationship to Borrower(s)

I confirm that the above details are true and correct.

Signature of authorised signatory

X

Date

____ / ____ / ____

For more than one authorised signatory, please attach an additional sheet to your application.

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Section 4
New Authorised
Signatory
Details
(Cont.)

Proof of Identity Requirements

| | | |
|---|--|--------------------------|
| Select ONE valid option from this section only | | |
| The identification provided must contain the individual's full name and either residential address (not PO Box) and/or date of birth | Australian State/Territory driver's licence containing a photograph of the person | <input type="checkbox"/> |
| | Australian passport (a passport that has expired within the preceding 2 years is acceptable) | <input type="checkbox"/> |
| | Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person | <input type="checkbox"/> |
| | Foreign passport or similar travel document containing a photograph and the signature of the person* | <input type="checkbox"/> |
| *Documents that are written in a language other than English must be accompanied by an English translation prepared by an accredited translator. | | |
| If you are unable to provide one of the forms of identification detailed above, please contact our Account Management Team on 1300 304 065 for further options. | | |

Section 5
Declaration and
Signing

I/We authorise the person(s) identified as the New Authorised Signatory in Section 4 to act on my/our behalf in relation to the my/our margin lending facility.

I/We authorise the revocation and/or changes to my/our existing authorised signatory as identified in this form.

First Borrower

Print Full Name

Signature

Date

 / /

Second Borrower

Print Full Name

Signature

Date

 / /

Company Borrower or Company Trustee

In all cases, either two directors, one director and one secretary or the sole director/secretary must sign.

Company Director

Print Full Name

Office Held

Signature

Date

 / /

Company Director/Secretary (if applicable)

Print Full Name

Office Held

Signature

Date

 / /

Please send the completed form and photocopies of relevant required identification to:
St.George Margin Lending, Reply Paid 1467, Royal Exchange NSW 1224 or fax to 1300 179 540
(International 61 2 9995 8292)

Office Use Only

Actioned By

Date

 / /

Reviewed By

Date

 / /