



To set up a BPAY® Transfer from your Auswide Bank Account

			Di	ate:
Internal use only Auswide Bank branch/agency				
Branch No.:	Operator No.:	Signa	ature verified by:	
Banking Services				
Date received:	Date loaded:	Operator	No.:]
Your Contact Phone:	C	Contact Email:		
Please arrange for the following action	to be taken on my/our behal	lf:		
Type of Authority: 🔾			•	Internal use only
NEW			Authority No.:	
			Existing Authority No.: _	
CANCEL Amount \$:	Effective from:		Current Authority No.:	
Date of la	ast payment to be debited:		Carrent Authority No	
CHANGE				
To alter next payment date	Next payment of	date:	Change to new dat	e:
To alter frequency (ie. weekly/m	onthly, etc.) Existing frequen	ncy:	New frequency:	
To replace account transferred f	rom Account No.:			
To alter existing amount to be to	ansferred Existing amoun	t \$:	New amount \$:	
Note – any other changes requir	e a new authority form to be	completed.		
Account to be DEBITED at Ausw	ide Bank: 🔾		_	
Account No.:			Account Type: S	
Account Name:				
Date of commencement:	Frequency	(once off/weekly/fortnight	ly/monthly/quarterly):	
Date of final payment:	or until further	notice		
			Amount sof payment]
By completing this form, you accept Banking Services which relate to BPA www.auswidebank.com.au or by co	y . If you do not already have			
Account Signature/s: •	•		Ď	
BPAY Payment Details: •				
BPAY Biller Code:				
BPAY Biller Name:				
BPAY Biller Code:				
Lodgement Reference:				