

SWITCH OF FINANCIAL
INSTITUTION AND
ACCOUNT DETAILS

For recurring payments only

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To: (name of User) DE User ID: (Note: Debit/Credit Users are required to verify (by signature comparison or other means) that this form has been properly authorised by the Customer before making any changes to the Customer's Direct Debit/Credit arrangements. Debit/Credit Users must contact the Customer if there is any doubt as to the Customer's authorisation). I/We have changed financial institutions and as a result my/our account details have changed. With immediate effect, please use the new account details provided below for my/our Direct Debits /Direct Credits.								
My/Our Direct Debit(s)/Dir My/Our Full Account Name:	Last Payment Date:	Amount:	: Debit/Credit: (Debit/Credit)					
(These details can be found on yo My/Our OLD Account detail BSB:	ur regular arrangements list from your old	financial institution)						

My/Our NEW Account details:

BSB: (645–646	Account Number:				
Financial Institution: Auswide Bank Ltd						

I/We confirm that I/we am/are authorised to operate the account represented by the BSB and Account Number described immediately above (My/Our New Account Details) and:

- For Direct Debits, I/we authorise you to debit My/Our New Account Details, in accordance with the terms of my/our existing Direct Debit Request(s).
- For Direct Credits, I/we authorise you to make further payments due to me/us by crediting My/Our New Account Details.

Accountholder Signature (in terms of the account author	-	<u></u>	
Date:	Telephone No.:		
To User Institute:		(user FI Name)	Date Sent:
ABN 40 087 652 060 F (07)	0 138 831 1 4152 3499 vide@auswidebank.com.au		auswidebank.com.au