

Switch of regular payments authority

By completing this form you are agreeing for us to act on your behalf to obtain a regular payments list being paid from your personal account/s at another financial institution(s). The list will include all of your regular debits and credits that you have organised with a 3rd party from your account. Any payments that you have organised yourself; such as periodical payments, recurring or pay anyone payments, will need to be re-set by you within internet banking or call 1800 800 225.

Note: Please provide a separate form for each financial institution that a regular payments list(s) is required for.

What are your personal details?

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss Other		Member no.	
First names			Surname	
Street no. & name				
Suburb	State		Postcode	
Postal address (if different from above)				
Suburb	State		Postcode	
Home phone	Work phone		Mobile phone	
Email				

What account(s) would you like a regular payments list for?

Financial institution				
BSB		Account no		
Account name			Account signatory(ies)	

Please sign below in black pen only

I/We consent for a regular payments list to be disclosed to the Bank.

I/We understand and acknowledge that:

- the regular payment list contains my/our personal information;
- I am/we are authorised to operate the account described above, and
- the accounts listed are personal accounts held in my/our name(s).

I/We understand that the Bank will provide me/us with the regular payments list for review prior to establishing new regular direct debit and direct credit payment arrangements.

Signature of first account holder

Signature	Date
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Signature of second account holder

Signature	Date
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Office use
only

Member no	
Operator no	
Date actioned	
Sig verified by	

Returning this form



Firefighters Mutual Bank
Reply Paid 7501 Silverwater NSW 2128



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