



# Third party authority to operate

Individual & Joint Accounts

T 02 9859 0585 F 02 9859 0555 PO Box 1967 Macquarie Centre 2113

ABN 77 087 650 217 AFSL/Australian Credit Licence 240807

Please give the person named below (**the Signatory**) access to operate the transactional, savings or deposit accounts specified below or, in the case of a joint account, that account only, to do the following:

- » carry out withdrawals on the account, for any purpose, including signing cheques;
- » make enquiries about account balances and transactions on the account, including any debit balance or available credit on a transactional account.

Please allow <b>the Signatory</b> to do the above via Internet Banking	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please issue <b>the Signatory</b> with a Visa debit card	Yes <input type="checkbox"/> No <input type="checkbox"/>
The Signatory does not have authority to:	
<ul style="list-style-type: none"> <li>» change any of the signatory authorisations on the account;</li> <li>» give a 3rd party access or authority to operate on the account;</li> <li>» change any daily transaction limits on the account;</li> <li>» make enquiries about loan account balances or available credit on a loan account (except for transactional accounts)</li> <li>» change contact details, including the mailing address for statements, or close the account.</li> </ul>	
» <b>This authority cancels all existing authorities I/we have given you</b>	
» <b>I/We are responsible for all the Signatory's transactions</b>	

## Account Details

**WARNING:** Please note that the above authority will apply to **all** accounts nominated below. If you wish to allow different levels of access to different accounts, you will need to use separate forms.

S1  S50  S40  S8  S33  S4  S20/21  Others (please specify)

## Accountholder Details

For joint accounts, all parties to the account are to provide their particulars and sign below

(1) Surname	<input type="text"/>	(2) Surname	<input type="text"/>
First Name	<input type="text"/>	First Name	<input type="text"/>
Member Number	<input type="text"/>	Member Number	<input type="text"/>
Sign	<input type="text"/>	Sign	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>
(3) Surname	<input type="text"/>	(4) Surname	<input type="text"/>
First Name	<input type="text"/>	First Name	<input type="text"/>
Member Number	<input type="text"/>	Member Number	<input type="text"/>
Sign	<input type="text"/>	Sign	<input type="text"/>
Date	<input type="text"/>	Date	<input type="text"/>

## Signatory Details

### 1st Signatory Details

Title		Home phone	
Surname		Daytime phone	
Given Names		Mobile Number	
Member number if a member		Date of birth	
Residential Address			Postcode:
1st Signatory Specimen Signature			

### 2nd Signatory Details

Title		Home phone	
Surname		Daytime phone	
Given Names		Mobile Number	
Member number if a member		Date of birth	
Residential Address			Postcode:
2nd Signatory Specimen Signature			

### 3rd Signatory Details

Title		Home phone	
Surname		Daytime phone	
Given Names		Mobile Number	
Member number if a member		Date of birth	
Residential Address			Postcode:
3rd Signatory Specimen Signature			

## Account Signing Authority

Method of operation for 2 or more signatories

Any one to sign  Any two to sign  All parties to sign

### Office use only - Record of Identification Procedures for Signatories who are not Members

For Signatory 1: Customer Identification Procedure – Individual carried out and document(s) produced were:

For Signatory 2: Customer Identification Procedure – Individual carried out and document(s) produced were:

For Signatory 3: Customer Identification Procedure – Individual carried out and document(s) produced were:

For Signatory 4: Customer Identification Procedure – Individual carried out and document(s) produced were:


## ID Requirements

The law requires us to verify your identity when you open an account, change your name or when you become a signatory to an account.

You are required to provide the following identification with your application:

1. One document from List A – Photographic identification OR
2. One document from List B and one from List C

If you are mailing a copy of your identification documents, photocopies will be accepted however they must be certified by a person on the certifier categories list. The certifier will need to sight the original documents by following the instructions in the certifier endorsement section below.

All signatories to the account must be identified, please supply identification documents for signatories who are not already members.

**If you are presenting original documents at the LCU office then this certifier endorsement is not required**

### List A - Primary Photographic Identification

ID must be issued in Australia and must confirm full name and date of birth.

- » Passport (current or expired within 2 years)
- » Drivers licence (current) – front and back
- » Proof of age card (current)

### List B - Primary Non-Photographic Identification

ID must be issued in Australia and must confirm first name, surname and date of birth or address.

- » Citizenship Certificate
- » Centerlink pensioner concession card (current)

### List C - Secondary Identification

ID must be issued in Australia and must confirm full name and date of birth.

- » Council rates or utilities bill eg. water, phone, electricity etc (not more than 12 months old)
- » Tax assessment notice (not more than 12 months old)
- » Proof of Government benefit eg Austudy, family tax benefit (not more than 12 months old) - may NOT be used in conjunction with Centrelink Pension Concession Card in List B

## Certifier Categories

1. Person who is enrolled on the roll of the Supreme Court of a state or territory, or the High Court of Australia, as a legal practitioner
2. Judge of a court
3. Magistrate
4. Chief executive officer of a Commonwealth court
5. Registrar or deputy registrar of a court
6. Justice of the peace/Commissioner for Declarations
7. Notary public
8. Police officer
9. Agent of the Australia Postal Corporation who is in charge of an office supplying postal services to the public
10. Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public.
11. Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
12. Officer with 2 or more continuous years of service with one or more financial institutions
13. Finance company officer with 2 or more continuous years of service with one or more finance companies
14. Officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees
15. Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants

## To be completed by the certifier (if applicable)

### Details of Identification

Full name of person being identified

Type of documents certified

### Details of Certifier

Title

Surname

Given Name (s)

Occupation

Category of Certifier

### Certifier Endorsement

I have examined the original identification documents listed above

I have enclosed all certified copies of each document for LCU

I have endorsed each copy of the identification document with the following statement

This is to certify that this is a true copy of the original which I have sighted. Date, name, signed, title, registration number (if applicable).

Signature

Date