

Phone Banking Service Options

Complete the form using blue or black pen and print in clear CAPITAL LETTERS

	re an HSE , or link a		, Trust or Non-Trading Entity please co	omplete t	this form to amend the service			
M	ail the co	mpleted form to: G l	PO Box 5302, SYDNEY NSW 2001	OR	Fax to: 1300 765 150			
ENTITY	DETAILS							
Entity customer number (9 digits)			Registered name					
ABN (if applicable)			Contact phone number					
Postal ad	ddress – D	ocuments relating t	to the services will be mailed to this a	ddress				
					Postcode			
-HOED D								
USER DETAILS								
Title First name(s)			Surname					
Personal Banking Number (10 digits)								
ACCOUNT ACCESS								
A dal/Dan	4 4		to Musing the Heavy Dhaves Developes a second					
Add/Ren		following accounts t	to/from the User Phone Banking acces	ss	Account Number			
	Ac	following accounts t	to/from the User Phone Banking acces	SS	Account Number			
Ac	Ac	following accounts to		ss	Account Number			
Ac	Ac	following accounts t		3S	Account Number			
Ac Ac	Ac	rollowing accounts to cess Remove Remove		3S	Account Number			
Ac Ac	Ac	Following accounts to cess Remove Remove Remove Remove Remove Remove Remove	BSB Number	3S	Account Number			
Ac Ac AMEND	Acdd	Remove Remove Remove Semove Semove Remove Re	BSB Number					
Ad A	Acdd	Remove Remove Remove Semove Semove Remove Re	BSB Number					
Add	Accorded Acc	Remove Remove Remove Semove Semove Remove Services below.	BSB Number					
AMEND All service indicate to Note: this	Accorded Acc	Remove Remove Remove Semove Semove Remove Services below.	BSB Number NS when you set up Phone Banking. If yo					
AMEND All service indicate to Note: this	Accorded Acc	Remove Re	BSB Number NS when you set up Phone Banking. If your dinked HSBC Australian accounty.	u wish to	o restrict Phone Banking access,			
AMEND All service indicate to Note: this	Accorded Acc	Remove Remove Remove Remove To SERVICE OPTION tomatically included red services below.	BSB Number NS when you set up Phone Banking. If your linked HSBC Australian accounting Foreign Exchange transactions if recommends to the second se	u wish to	o restrict Phone Banking access, update Term Deposit maturity Limit AUD 500,000 *			
AMEND All service indicate to Note: this	Accorded Acc	Remove Remove Remove Remove To SERVICE OPTION tomatically included red services below. Transfer between instructions (included Automated: Transfer Remove Transfer Remove	BSB Number NS when you set up Phone Banking. If your dinked HSBC Australian accounty.	u wish to	o restrict Phone Banking access, update Term Deposit maturity Limit AUD 500,000 *			

^{*} Further details of daily Phone Banking limits are contained in the relevant product disclosure statement for the underlying deposit product.

CERVICE ACCESS								
SERVICE ACCESS								
For the Entity as a whole , please indicate	ate if you want to:							
Cancel this Service Temporarily	suspend this Servi	ce From DD / MM / YY	To DD / MM / YY					
DECLARATION AND AUTHORISATION	N							
By signing below, the Account holder h	•							
This form contains its instructions to HSBC about how a User is authorised by the Account holder to use the Phone Banking Service to administer and transact on the Account, and that, solely with respect to the Account holder's use of the Phone Banking Service, where the instructions contained in this document are different from any authorisation set out in the Mandate for Accounts or other instructions relating to its Accounts, the instructions in this document will prevail.								
The Account holder will be liable for the actions of Authorised.								
• The Phone Banking Service is subje	 liable for the actions of Authorised Signatories and/or Users in the Mandate for the Accounts. The Phone Banking Service is subject to the terms and conditions contained in the relevant product disclosure statement or terms and conditions for the underlying product. 							
Who needs to sign this form								
 If you are a trust, all the trustees must sign this document in accordance with the trust deed. If the trustee is a company, also refer to point 2 below as to how each director signs. 								
	 If you are a company and there is only one director who is also the only company secretary, that director must sign; if there are two or more directors, either two directors or a director and a company secretary can sign. 							
3. If you are in a partnership formed by	y individuals, eac	h and every individual partner r	nust sign.					
SIGNATORY 1		SIGNATORY 2						
Signature	Date	Signature	Date					
X	DD/MM/YY	X	DD/MM/YY					
Name		Name						
Office/Title		Office/Title						
For multiple signatories, please attach	extra pages for th	e additional signatures.						

Signature

SV Checking officer name

Office Use Only

Date