

Direct Debit Request – Home Loan Payments

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

Mail the completed form to: GPO Box 5302, SY	/DNEV NC	W 2001	·	•	
with the completed form to. GFO BOX 9302, 31	IDINET INS	VV 2001			
CUSTOMER DETAILS					
Full customer name (Individual, Joint, Trust or Compa	any Borrov	vers)			
REQUEST AND AUTHORITY TO DIRECT DEBIT					
Type of request Establish new regular payme	ent to my l	oan	Cance	el regular paymen	t relating to this loan
I want HSBC to take payments from my nominated ac	count to p	ay payments	on my loar	n account:	
1 HSBC loan type		BSB	-	Account numbe	r
Pay to my loan account:					
The amount due under my home loan each mor				and the author	
The amount of \$ what you ha			o pay us m	ore tnan tnis amo	ount then we'll take
Frequency			If you s	select "weekly" then yo	ur payments will begin one n your loan. If you select
Monthly Fortnightly Weekly Starting	g on DI) / MM / Y	"fortni		nents will begin two weeks
2 HSBC loan type		BSB		Account numbe	r
Pay to my loan account:					
The amount due under my home loan each mor					
The amount of \$\frac{\frac{1f your agree}{what you here}}{\frac{1}{2}}	eement say ave to pay	vs you have to us.	o pay us m	ore than this amo	ount then we'll take
Frequency					ur payments will begin one n your loan. If you select
Monthly Fortnightly Weekly ► Starting	g on DI) / MM / Y	"fortni		ents will begin two weeks
Your nominated account (where we'll take the regula	r payment	from)			
Name and address of the Financial Institution at whi			ount is held	I	
Nominated Account holders name(s)		BSB		Account numbe	r
Regular payments will operate at the above frequent that date, then we'll run the regular payment on a date	te that line	s up with the	frequency	you've chosen. If	you want to cancel or
change your regular payment arrangement, or stop a Limited, GPO Box 5302, Sydney NSW 2001.	payment tr	ien call us on	1300 308 00	J8 or write to us a	t HSBC Bank Australia
ALITHOPICATION					
AUTHORISATION	this fames a		م مناب ما الما	to toles as sule	
By signing below, you're telling us that the details in nominated account and pay them into your loan account the nominated account we'll be taking payments capacity as a trustee for the trust. Please refer to clau information on direct debit payments.	nt. You're a from. If yo	also telling us u're a trustee	that you've , you're sig	signed in accorda gning in your owr	ance with the authority a capacity and in your
Individual Signature 1 DD/N	1M/YY	Individual Signature 2	X		DD/MM/YY
Complete the following only if a one director compan	ıy				
l (print name)	sign	in the capacit	y of sole di	rector & sole secr	etary of the company
Company Director Signature 1	1M/YY	Company Director Signature 2	X		DD/MM/YY
Name		Name			·
Office Use Only Loan Account Number Loaded (Initial) Check	ed (Initial)	Staff Digital Si	ignature		SV