

Term Deposit Application/ Rollover Instructions



Police & Nurses Limited ABN 69 087 651 876 AFSL 240701 Australian Credit Licence 240701
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MEMBER DETAILS

Member name _____ Member number _____
Member name _____ Member number _____
Rollover/start date _____ Account number _____

APPLICATION FOR NEW TERM DEPOSIT

Please invest \$ _____ for a term of _____ months/years at the rate of _____ % pa
(refer to our rate sheet)

Funds are paid in by: cash/cheque transfer from account number _____

Interest is to be paid: on maturity or (regular income only) monthly quarterly annually

Interest payment instructions (permanent instruction):

cheque to my/our address transfer to BSB _____ Account number _____

Account name _____

Method of operation: either to sign both to sign (if a method is not selected, this account will be classed as either to sign)

ROLLOVER INSTRUCTIONS FOR EXISTING TERM DEPOSIT

Please reinvest \$ _____ for a term of _____ months/years at the rate of _____ % pa
(refer to our rate sheet)

Additional funds of \$ _____ to be paid in by: cash/cheque transfer from account number _____

Interest is to be paid: on maturity or (regular income only) monthly quarterly annually

Interest payment instructions (permanent instruction):

cheque to my/our address transfer to BSB _____ Account number _____

Account name _____

Method of operation: either to sign both to sign (if a method is not selected, this account will be classed as either to sign)

FULL/PART REDEMPTION OF MATURING TERM DEPOSIT

Please withdraw \$ _____ from my existing term deposit. Please disburse these funds by:

cheque to account holder cheque payable to _____

transfer to BSB (external accounts only) _____ Account Number _____

Account name _____

Additional information _____

AUTHORITY

I/We hereby request that P&N invest/redeem the funds as described above. I/We agree to the Terms & Conditions of the account.

Date _____

Signature one

Date _____

Signature two

OFFICE USE ONLY

Signature/s verified by _____ (ID method used) Non-standard rate authorised by _____

Date received _____ Signature of receiving officer _____ Op # _____

Disclosure documents issued: term deposit PDS term deposit interest rate schedule certificate issued

Method of disclosure: handed posted emailed

checked by authorised officer (name): _____