



Third Party Banking – Home Loan Privacy Consent and Supplementary Products Application

Purpose of this form
Use this form to apply for a supplementary financial product offered by the Commonwealth Bank, and provide us with your details or that of your company or trust. By signing this form you authorise us to use your information in the ways described in Third Party Banking Home Loan Privacy Consent and Supplementary Product Details and agree to abide by the various terms and conditions for each product you apply for.

Part A – Broker to Complete

Broker Head Group		Broker name	
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
Broker ID	RM State	Contact phone number	Mobile phone number
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Broker application number	Bank reference number	Joint Loan (tick one box only)	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Products customer is applying for (please tick (✓))

- Smart Access, Complete Access*, Smart Access* / Complete Access* / Streamline Overdraft, Line of Credit and Equity Unlock Loan for Seniors (refer to Part D)
- NetBank (Internet Banking) (refer to Part E)
- Direct Debit Request for payment of Rate Lock Fee (refer to Part F)
- Low Documentation Loan (refer to Part G)
- Commonwealth Bank Credit Card (refer to Part H)

Please send an application for MISA to: Customer 1 Customer 2

1. Acknowledgements

1.1 Identity Verification and Privacy Consent (All to sign)

I/We acknowledge that:

- I/We agree to Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part A, and authorise the Bank to exchange my information;
- I/We give permission to the person named above; and
 - any other person acting for the Broker Head Group under a finance brokerage agreement with you; and
 - any other person named below; and
 - all other persons named as applicants in my/our credit application

to give to and/or receive from you any record or personal information about me or my company in connection with the processing and accepting of any application to you for credit and/or the subsequent management of the credit provided.

1.2 Supplementary products (All to sign)

I/We acknowledge that:

- I/We apply for the products indicated with a tick under **Broker to complete** and agree to the terms and conditions set out in Third Party Banking Home Loan Privacy Consent and Supplementary Product Details (The Bank may pay a fee or commission to a third party if they introduced me/us to the Bank).
- If I/We give the Bank my/our email or mobile phone details, I/We agree that it may communicate with me/us electronically so that the Bank can provide updates, reminders and/or information on the Group's products and services.
- I/We am/are not an undischarged bankrupt.
- the Bank will rely on information in this form and where applicable, that obtained from a credit reporting agency, to make a decision as to whether to offer me/us the products applied for.

Smart Access*, Complete Access*, Smart Access* / Complete Access* / Streamline Overdraft, Line of Credit, Equity Unlock Loan for Seniors, Commonwealth Bank Credit Card, and Netbank only (tick if applicable)

- I/We acknowledge that terms and conditions related to the above products will be provided as indicated in Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part B & Part C.

Rate Lock / Trust Investigation Direct Debit Request

(tick if applicable)

- I/We acknowledge that any Rate Lock Fee/Trust Investigation fee is not refundable even if I/we do not proceed with the loan.
- I/We authorise the Bank to verify details of my/our account with my/our financial institution and for it to provide information to the Bank for that purpose.

No advice

- I/We acknowledge that my/our broker has not given me/us a recommendation, statement of opinion, or a report of either of those things, intended to influence a decision concerning a, **Smart Access Account, Complete Access Account or NetBank.**

Customer/Director 1/Beneficiary 1/Trustee 1	Date
<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>

A tick (✓) in the box means that you do not wish to receive marketing information from the Commonwealth Bank Group.

Customer/Director 2/Beneficiary 2/Trustee 2	Date
<input style="width: 100%; height: 30px;" type="text"/>	<input style="width: 100%; height: 30px;" type="text"/>

A tick (✓) in the box means that you do not wish to receive marketing information from the Commonwealth Bank Group.

Part B – Customer and Company Details

It is against the law to use false names. You must state all the names by which you are commonly known on this application form.

Customer/Director 1

Title Full given name(s)

Surname Other names known by (if any)

Date of birth Occupation

Residential address (PO Box is not acceptable)

 State Postcode

Postal address

 State Postcode

Home phone number Work phone number

Mobile number

Email address

Company name

Company Registered business address (PO Box is not acceptable)

 State Postcode

Customer/Director 2

Title Full given name(s)

Surname Other names known by (if any)

Date of birth Occupation

Residential address (PO Box is not acceptable)

 State Postcode

Postal address

 State Postcode

Home phone number Work phone number

Mobile number

Email address

Company name

Company Registered business address (PO Box is not acceptable)

 State Postcode

Part C – Trustee Details**Trustee Information (all trusts)**

Full name of Trust

Business name of Trust (if any)

Registered business address (PO Box is not acceptable)

 State Postcode

Trust type (unit, discretionary, family trust, managed funds, other)

Is the Trust operating as a charity? (Please tick (✓) appropriate box)

Yes. If Yes, what is the objective/purpose of the charity?
 (e.g. vocational training for disabled persons, assistance for tsunami victims, building fund for a particular school or institution etc).

No

Was the Trust established in Australia? (Please tick (✓) appropriate box)

Yes.

No. If No answer these questions:

1. Provide name of country where Trust was established

2. What is the objective of the Trust?

3. Why are you asking for an account/facility with the Commonwealth Bank of Australia or related company?

Beneficiary details

Provide full name of each beneficiary or type of membership class

Beneficiary 1 or Unit Holder 1

Beneficiary 2 or Unit Holder 2

Beneficiary 3 or Unit Holder 3

For more than three beneficiaries, provide details on a separate sheet **OR** details of membership class/es (e.g. unit holders, family members of named person, charitable purpose, other please describe). If there are more classes, provide details on a separate sheet.

Trustee 1

Title Full given name(s)

Surname Other names known by (if any)

Company name

Trustee 2

Title Full given name(s)

Surname Other names known by (if any)

Company name

Part D – Smart Access*, Complete Access*, Smart Access* / Complete Access* / Streamline Overdraft, Line of Credit and Equity Unlock Loan for Seniors Application

Complete this section if you wish to apply for any of the banking products listed below.

Please ensure you read Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part B and C.

1. Choose a product(s) (please tick (✓))

- Complete Access* overdraft
- Smart Access* overdraft
- Complete Access*
- Smart Access*
- Line of Credit
- Equity Unlock Loan for Seniors
- Streamline Overdraft

* An application for this product includes an application for a Debit MasterCard.

2. Your Smart Access* / Complete Access* / Streamline Overdraft details

BSB number Account number

Limit requested Term (temporary Overdrafts only)

Purpose and clearance arrangements for the Overdraft (if applicable)

3. Tell us how you want to operate your account (Joint accounts only) (please tick (✓) one box only)

- Either to operate (Mandatory for Smart Access and Complete Access)
- Both must sign

Cheque book required

- No
- Yes Number of books

Name on cheque book:

- No crossing
- Not negotiable
- Not negotiable A/C payee only

4. Ask us to arrange electronic access (available where 'Either to Operate' is selected as the Method of Operation in (3)). (please tick (✓) one box only)

Option 1

- Order me a new card for the following:
 - Debit MasterCard
 - Keycard

Cardholder name 1

Cardholder name 2

Option 2

- Link my account to my existing Debit MasterCard/Keycard/Credit Card.

Card number 1

Card number 2

Card number 3

Card number 4

Note: We will link your account as your primary **savings** account where possible. Our next option will be to link your account as your primary **cheque** account followed by **other**.

Statement delivery method (please tick (✓) one box only)

- Paper
- Online

Note: to receive online statements you must register with NetBank and supply your current email address.

5. Your Tax File Number

1. TFN/Exemption category

2. TFN/Exemption category

You are not legally obliged to give us your tax file number for the account. However, if you don't quote it, the law requires us to deduct tax from any interest earned on the account above a certain threshold.

Part E – NetBank (Internet Banking)

Complete this section if you wish to apply to use NetBank. Please ensure you read Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part C.

1. Choose which plan you want (please tick (✓)):

Standard plan Business plan

2. Name the accounts to be linked to NetBank

Account type (e.g. home loan, passbook etc.)	Account number (if known)	Account name
1.		
2.		
3.		
4.		

Part F – Direct Debit Request to Pay the Rate Lock Fee / Trust Investigation Fee

Complete this section to pay the Rate Lock Fee / Trust Investigation Fee by direct debit.

Please ensure you read Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part D for important information about payment of the Rate Lock Fee / Trust Investigation fee by direct debit request.

I/We give permission for the Debit User (Commonwealth Bank of Australia (APCA user ID number 650 or 301813)) to:

- arrange for money to be debited from my/our account at the financial institution named below through the Bulk Electronic Clearing System or to debit my/our account by other means
- maintain the Direct Debit in accordance with the terms set out in Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part D.

Details of account to be debited for Rate Lock Fee / Trust Investigation fee

Name of financial institution

Address of the financial institution

State

Postcode

Account name (please insert name in full)

BSB number

Account number

ABN/ARBN (if applicable)

Branch name

Part G – Low Documentation Loan Application

Complete and sign this section if you wish to apply for a Low Documentation Loan.

Please ensure you read Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part F for important information about Low Documentation Loans.

Period of time self employed (years/months)

ABN

Gross taxable income* Individual

Total assets

Total liabilities

Name of business/company

*This amount is your self-employed income over the last full financial year/reporting period after you deducted all business expenses. Do not include income from any other source in this amount.

I/We declare and acknowledge that:

- I/We are currently self-employed
- The financial statements for me/us/the company named in Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part F are currently unavailable
- In considering my/our application for a loan, the Bank will rely on the details I/we have provided. It will also make further enquiries to confirm the income or assets stated via Business Activity Statements (BAS) and by checking if my/our income is registered for Goods and Services Tax (GST) where applicable.
- In the event of default under any loan approved by the Bank, it may exercise its rights under any mortgage executed by me/us as security, including selling the property to be mortgaged.
- The Bank strongly recommends that I/we confirm that the financial information provided is accurate, and that the stated income, after expenses, is sustainable over the intended loan term.
- If I/we have any doubts about these matters or the level of borrowing and repayments for which I/we will become responsible I/we should obtain independent financial advice.

Customer/Director 1

Date

Customer/Director 2

Date

Part H – Commonwealth Bank Credit Card Application

Complete this section if you wish to:

- apply for a Credit Card.
- ask us to transfer a nominated amount from your non-Commonwealth Bank credit or store card account/s to your new Commonwealth Bank Credit Card.

For important information about Credit Cards please refer to Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part E.

1. Your personal details (use clear block letters)

Title Full given name(s)

Surname Other names known by (if any)

Date of birth Driver's licence number

Number of dependants Home phone number

Work phone number Mobile number

()

Email address

2. Choose the type of card you want

(please tick (✓) one box only)

Credit Card Type	Package Annual fee exclusion	No-Package (annual fee waived first year)
Awards	<input type="checkbox"/> (WPKIFR)	<input type="checkbox"/> (HSRDE)
Low Fee	N/A	<input type="checkbox"/> (HSCDE)
Low Fee Gold	<input type="checkbox"/> (WPKGNR)	<input type="checkbox"/> (HGCDE)
Low Rate	<input type="checkbox"/> (WPKLOW)	<input type="checkbox"/> (HSLDE)
Low Rate Gold	N/A	<input type="checkbox"/> (HGLDE)
Gold Awards	<input type="checkbox"/> (WPGC)	<input type="checkbox"/> (HGRDE)
Platinum Awards	N/A	<input type="checkbox"/> (HPRDE)

3. Residential address (PO Box is not acceptable)

State Postcode

Postal address (if same as above leave blank)

State Postcode

Note: To receive electronic statements, you must register for NetBank and provide a current email address.

4. Your status as a resident in Australia (please tick (✓))

- Yes, I am a permanent resident ▶ Go to question 5
- No, My visitor's visa expires on ▶

5. Nominate an additional cardholder (please tick (✓))

- No additional cardholder ▶ Go to question 6
- Yes ▶ Please give details of additional Cardholder

Note: The Cardholder must be 16 years of age or over.

Title Full given name(s)

Surname Other names known by (if any)

Date of birth

Residential address (PO Box is not acceptable)

 State Postcode

Please let this person know that you have given us their personal details. Advise them that we will only use their information to provide them with an additional card.

Do they have any accounts with the Commonwealth Bank? (please tick (✓))

- Yes Branch number Account number
- No ▶ Go to question 6

6. Emergency contact name and number

Please let a close relative/friend know that you have given us their personal details, and that we will only use their information if we need to contact you.

Name

Contact phone number

7. Do you have a savings/investment/cheque account with the Commonwealth Bank? (please tick (✓))

- Yes Branch number Account number
- No ▶ Go to question 8

8. Do you wish to transfer balances from non-Commonwealth Bank credit or store cards (optional)? (please tick (✓))

- I would like to transfer the nominated amount below from my non-Commonwealth Bank credit or store card account/s to my new Commonwealth Bank Credit Card. (please ensure you read Third Party Banking Home Loan Privacy Consent and Supplementary Product Details, Part E.)

Bank/Store/Financial Institution

Credit/Store card account number

Amount to be transferred

\$

Bank/Store/Financial Institution

Credit/Store card account number

Amount to be transferred

\$

Bank use only

Lodgement branch

Staff number Requested card limit

\$

Customer home loan account BSB Home loan number

Fax completed form to (02) 9635 4200

Note: Minimum credit card limits apply.