

# Standing Instruction (Transfer of Funds) Based on Date

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

Office  Date

Type of request

New standing instruction – Complete all sections

Amendment of an existing standing instruction – Complete all sections and indicate which field(s) are changing in your request

Cancel ALL existing standing instructions – Complete Questions 1, 2 and 5

Cancel ONE existing standing instruction – Complete all sections

## ACCOUNT INFORMATION

1. Primary account number (to be debited)

2. Account name

3. Commencement date  4. Frequency (Daily, Weekly, Monthly, etc)

5. Expiry date (Must be a date after last transaction date)  Total no. of instructions  OR

6. Debit account reference

## TRANSFER INFORMATION

Please complete either Option 1 or Option 2

7. Option 1  
Transfer a fixed sum of:

Currency  Amount

Amount in words

Payment method

Demand draft  Internal transfer  Bank cheque  Telegraphic transfer

Payment currency

7. Option 2  
Transfer the available credit balance of the above mentioned account less retention amount of

Amount in words

## BENEFICIARY INFORMATION

8. Name and address of beneficiary's bank

9. Beneficiary's BSB  Beneficiary's account number

10. Beneficiary's name(s)

11. Beneficiary's residential or business address

12. Beneficiary's reference

## DECLARATION

- I/We understand that if there are insufficient funds in my/our account on three consecutive payment occasions, the Bank may cancel my/our instruction without prior advice to me/us.
- I/We understand that a charge may be levied, at the Bank's discretion, on each instruction payment rejected due to lack of funds.
- I/We understand that any charges levied (including commission, postage and stamp duty) may be debited to my /our account mentioned above.
- I/We understand that the Bank accepts no responsibility for any loss or delay which may occur in the transfer, transmission and/or application of funds or (in the case of remittance by telegraphic transfers) for any error, omission or mutilation which may occur in the transmission of any message or for its misinterpretation when received and I/we agree to indemnify the Bank against any actions, proceedings, claims and/or demands that may arise in connection with such loss, delay, error, omission, mutilation or misinterpretation.
- I/We understand that where the payment date falls on a holiday or a weekend, my/our account will be debited on the next business day to the payment date.

Customer 1

Signature

Name

Phone no.

Customer 2

Signature

Name

Phone no.

Office Use Only

Staff signature

Signature

S/I number

Data input checked and authorised by:

Signature

Result  Completed  Created  Modified  Deleted

S/I number  Time