



**Application  
for  
Housing and  
Small Business Finance**

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# Application for Housing and Small Business Finance

## Facsimile Transmission

**Business Development**

**Manager:** .....  
**Broker Code:** .....  
**Aggregator Group:** .....  
**Referrer Reference:** .....

**From:** .....  
**Contact Name:** .....  
**Accredited Code:** .....  
**Fax No.:** .....  
**Telephone No.:** .....  
**Mobile No.:** .....  
**Email Address:** .....

**Loan Applicant/s** .....

**Date:** .....

**Total No. of Pages -** .....

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### Checklist - Attached to this form

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- Loan Application Form
- Minimum Documentation Required... MDR Section No (ie SN01) 

S	N		
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- Serviceability Worksheet
- First Home Owner Grant Form (if applicable)
- Guaranteed Rate Fee

### ***Send Originals Direct to Suncorp.***

**Loan Comments** (Comments to Support Application) .....

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This communication is restricted. The communication contains confidential material which is intended for the addressee only and is subject to the confidentiality rights of the sender and addressee. Confidentiality or privilege is not waived, lost or affected in any way whatsoever. If you are not the intended recipient or addressee please notify the Bank immediately. Any interception or unintentional receipt is subject to these rights, advices and restrictions.

### **Important Information for Company and Trustee Borrowers**

Please note where a Borrower noted on this application is a Company or two or more Trustees all Directors of the Borrower (in the case of a Company) or all Trustees (in the case of two or more Trustees as Borrower), will be considered authorised for the purpose of transacting on the account unless otherwise stated in writing.

**Transaction Access** - by authorising a Director or Trustee to have Transaction Access on this Application we agree the authorised person can:

- Apply for electronic access to the nominated accounts/loans including the use of electronic terminals, which is governed by the Bank's "Terms and Conditions for Continuing Credit".
- Without giving prior notice to any other authorised person on the account, solely and at their own discretion, withdraw the entire amount of funds available in our account/loan, unless we have provided in writing, specific number to sign instructions on the account/loan. The Bank's terms and conditions for term loans require all Borrowers to sign in order to perform cashback.
- Obtain account/loan balances, details of transactions, statements of loan/account, even where a fee may be applicable.
- The ability to transact on our loan is dependant upon the Terms and Conditions for our loan type as stated in our loan contract and any variations to it.
- The Bank may, in future vary the methods for operating on Loans and at its discretion may refuse to act on this authority.
- Any request to increase the loan amount beyond that which was originally agreed, or to vary the loan contract in any way will require the written consent of all borrowers.

**Information Access** - by authorising this Director or Trustee to have Information Access we agree the authorised person can obtain:

Account/Loan Balances, Details of transactions, statements of loan/account, even where a fee may be applicable.

This does not allow the person to perform any type of debit transaction, open or close the account, or make any changes to information on the account other than their own information.

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

TYPE OF REQUEST (✓) <input type="checkbox"/> NEW <input type="checkbox"/> INCREASE IN EXISTING FACILITY <input type="checkbox"/>	
BRANCH/STATE <input style="width: 100%;" type="text"/>	INTRODUCER / BROKER NAME <input style="width: 100%;" type="text"/>
BRANCH NUMBER/ COST CENTRE <input style="width: 100%;" type="text"/>	INTRODUCER BROKER CODE <input style="width: 100%;" type="text"/>
MOBILE CONSULTANT/ BUSINESS DEVELOPMENT MGR <input style="width: 100%;" type="text"/>	CONTACT NAME <input style="width: 100%;" type="text"/>
EMPLOYEE NUMBER (if required) U <input style="width: 100%;" type="text"/>	ACCREDITED CODE <input style="width: 100%;" type="text"/>

**APPLICANT 1**

**APPLICANT 2**

**PERSONAL DETAILS**

APPLICANT <input type="checkbox"/> DIR/TRUSTEE GUARANTOR <input type="checkbox"/> GUARANTOR (NO ACCESS) <input type="checkbox"/> TRANSACTING ACCESS <input type="checkbox"/> INFORMATION ACCESS <input type="checkbox"/>	
MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> DR <input type="checkbox"/> OTHER <input type="checkbox"/> _____	
SURNAME <input style="width: 100%;" type="text"/>	
GIVEN NAMES <input style="width: 100%;" type="text"/>	
RESIDENTIAL ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
PREVIOUS RESIDENTIAL ADDRESS (if less than 3 years at current address) <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
POSTAL ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	
HOME TELEPHONE ( ) <input style="width: 100%;" type="text"/>	DAY OR MOBILE NO. ( ) <input style="width: 100%;" type="text"/>
FACSIMILE ( ) <input style="width: 100%;" type="text"/>	PASSWORD <input style="width: 100%;" type="text"/>
EMAIL ADDRESS <input style="width: 100%;" type="text"/>	
DATE OF BIRTH : : : : : <input style="width: 100%;" type="text"/>	DRIVERS LICENCE NO. <input style="width: 100%;" type="text"/>
NO. OF FINANCIAL DEPENDANTS <input style="width: 100%;" type="text"/>	AGE OF FINANCIAL DEPENDANTS <input style="width: 100%;" type="text"/>
RELATIONSHIP SINGLE <input type="checkbox"/> JOINT <input type="checkbox"/>	JOINT WITH NON APPLICANT <input type="checkbox"/> JOINT WITH APPLICANT NO. <input type="checkbox"/>
CONSUMER CREDIT INSURANCE I am interested in CCI <input type="checkbox"/>	FOR SUNCORP USE ONLY Loan 1   Loan 2
CCI Premium \$.....	\$.....
CCI Sum Insured \$.....	\$.....

APPLICANT <input type="checkbox"/> DIR/TRUSTEE GUARANTOR <input type="checkbox"/> GUARANTOR (NO ACCESS) <input type="checkbox"/> TRANSACTING ACCESS <input type="checkbox"/> INFORMATION ACCESS <input type="checkbox"/>	
MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> DR <input type="checkbox"/> OTHER <input type="checkbox"/> _____	
SURNAME <input style="width: 100%;" type="text"/>	
GIVEN NAMES <input style="width: 100%;" type="text"/>	
RESIDENTIAL ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
PREVIOUS RESIDENTIAL ADDRESS (if less than 3 years at current address) <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
POSTAL ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	
HOME TELEPHONE ( ) <input style="width: 100%;" type="text"/>	DAY OR MOBILE NO. ( ) <input style="width: 100%;" type="text"/>
FACSIMILE ( ) <input style="width: 100%;" type="text"/>	PASSWORD <input style="width: 100%;" type="text"/>
EMAIL ADDRESS <input style="width: 100%;" type="text"/>	
DATE OF BIRTH : : : : : <input style="width: 100%;" type="text"/>	DRIVERS LICENCE NO. <input style="width: 100%;" type="text"/>
NO. OF FINANCIAL DEPENDANTS <input style="width: 100%;" type="text"/>	AGE OF FINANCIAL DEPENDANTS <input style="width: 100%;" type="text"/>
RELATIONSHIP SINGLE <input type="checkbox"/> JOINT <input type="checkbox"/>	JOINT WITH NON APPLICANT <input type="checkbox"/> JOINT WITH APPLICANT NO. <input type="checkbox"/>
CONSUMER CREDIT INSURANCE I am interested in CCI <input type="checkbox"/>	FOR SUNCORP USE ONLY Loan 1   Loan 2
CCI Premium \$.....	\$.....
CCI Sum Insured \$.....	\$.....

**CURRENT RESIDENTIAL STATUS**

OWN <input type="checkbox"/> UNDER MORTGAGE <input type="checkbox"/> RENTING/BOARDING <input type="checkbox"/> LIVING WITH PARENTS <input type="checkbox"/> OTHER <input type="checkbox"/>	
LENDER / AGENT NAME <input style="width: 100%;" type="text"/>	
LANDLORD / AGENT ADDRESS <input style="width: 100%;" type="text"/>	
TELEPHONE ( ) <input style="width: 100%;" type="text"/>	CURRENT RENT \$ <input style="width: 100%;" type="text"/>

OWN <input type="checkbox"/> UNDER MORTGAGE <input type="checkbox"/> RENTING/BOARDING <input type="checkbox"/> LIVING WITH PARENTS <input type="checkbox"/> OTHER <input type="checkbox"/>	
LENDER / AGENT NAME <input style="width: 100%;" type="text"/>	
LANDLORD / AGENT ADDRESS <input style="width: 100%;" type="text"/>	
TELEPHONE ( ) <input style="width: 100%;" type="text"/>	CURRENT RENT \$ <input style="width: 100%;" type="text"/>

**EMPLOYMENT DETAILS**

CURRENT OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
EMPLOYMENT STATUS <input style="width: 100%;" type="text"/>	PAYROLL NO. <input style="width: 100%;" type="text"/>
EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
EMPLOYER TRADING NAME <input style="width: 100%;" type="text"/>	
EMPLOYER ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TELEPHONE ( ) <input style="width: 100%;" type="text"/>
<b>If you have been less than 3 years with this employer please give details of your previous employer. (3 years History required)</b>	
PREVIOUS OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
PREVIOUS EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
SUBURB <input style="width: 100%;" type="text"/>	POSTCODE <input style="width: 100%;" type="text"/>
<b>Details of Additional Employment (If applicable)</b>	
OTHER CURRENT OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
EMPLOYMENT STATUS <input style="width: 100%;" type="text"/>	PAYROLL NO. <input style="width: 100%;" type="text"/>
OTHER EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
OTHER EMPLOYER ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TELEPHONE ( ) <input style="width: 100%;" type="text"/>

CURRENT OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
EMPLOYMENT STATUS <input style="width: 100%;" type="text"/>	PAYROLL NO. <input style="width: 100%;" type="text"/>
EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
EMPLOYER TRADING NAME <input style="width: 100%;" type="text"/>	
EMPLOYER ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TELEPHONE ( ) <input style="width: 100%;" type="text"/>
<b>If you have been less than 3 years with this employer please give details of your previous employer. (3 years History required)</b>	
PREVIOUS OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
PREVIOUS EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
SUBURB <input style="width: 100%;" type="text"/>	POSTCODE <input style="width: 100%;" type="text"/>
<b>Details of Additional Employment (If applicable)</b>	
OTHER CURRENT OCCUPATION <input style="width: 100%;" type="text"/>	TIME THERE Yrs   Mths <input style="width: 100%;" type="text"/>
EMPLOYMENT STATUS <input style="width: 100%;" type="text"/>	PAYROLL NO. <input style="width: 100%;" type="text"/>
OTHER EMPLOYER COMPANY NAME (Company Name if Self Employed) <input style="width: 100%;" type="text"/>	
OTHER EMPLOYER ADDRESS <input style="width: 100%;" type="text"/>	
POSTCODE <input style="width: 100%;" type="text"/>	TELEPHONE ( ) <input style="width: 100%;" type="text"/>

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COMPANY, TRUST AND SELF EMPLOYED APPLICANTS

**WHAT PAGES DO WE NEED TO COMPLETE:**

**COMPANIES**

WHENEVER THE APPLICATION INVOLVES A COMPANY ENTITY COMPLETE THE COMPANY AND BUSINESS DETAILS SECTIONS. EACH DIRECTOR/GUARANTOR MUST COMPLETE PERSONAL AND FINANCIAL POSITION DETAILS.

**TRUST**

FOR APPLICATIONS INVOLVING EITHER UNIT OR DISCRETIONARY TRUSTS COMPLETE THE TRUST AND BUSINESS DETAILS SECTIONS. EACH PERSONAL TRUSTEE OR DIRECTORS OF CORPORATE TRUSTEES MUST COMPLETE PERSONAL AND FINANCIAL POSITION DETAILS.

**SELF EMPLOYED APPLICANTS**

ALL SELF EMPLOYED APPLICANTS COMPLETE THE BUSINESS DETAILS SECTION. EACH PROPRIETOR/BORROWER MUST COMPLETE PERSONAL AND FINANCIAL POSITION DETAILS.

TYPE OF REQUEST (✓)	NEW <input type="checkbox"/>	INCREASE IN EXISTING FACILITY <input type="checkbox"/>	INTRODUCER / BROKER NAME	
BRANCH/STATE			INTRODUCER BROKER CODE	
BRANCH NUMBER/ COST CENTRE			CONTACT NAME	
MOBILE CONSULTANT/ BUSINESS DEVELOPMENT MGR			ACCREDITED CODE	
EMPLOYEE NUMBER (if required)	U			

**BORROWING ENTITY**

**COMPANY DETAILS**    APPLICANT     TRUSTEE     GUARANTOR

COMPANY NAME     ACN

ABN

**TRUST DETAILS**    UNIT TRUST     DISCRETIONARY TRUST

TRUST NAME

TRUSTEE

SETTLER     DATE OF TRUST / VARIATIONS

**PROPRIETORS/SHAREHOLDERS/BENEFICIARIES**

NAME	RELATIONSHIP TO COMPANY/TRUST	DATE OF BIRTH	INTEREST
<input type="text"/>	<input type="text"/>	: : : : : : :	%
<input type="text"/>	<input type="text"/>	: : : : : : :	%
<input type="text"/>	<input type="text"/>	: : : : : : :	%
<input type="text"/>	<input type="text"/>	: : : : : : :	%

**BUSINESS DETAILS**

PLEASE COMPLETE FOR ALL TRANSACTIONS INVOLVING COMPANIES/TRUSTS OR SELF EMPLOYED APPLICANTS

BUSINESS STRUCTURE (✓) select as appropriate    SOLE TRADER/INDIVIDUAL     PARTNERSHIP     COMPANY

BUSINESS TRADING ADDRESS     POSTCODE

POSTAL ADDRESS     POSTCODE

**NATURE OF THE BUSINESS**

CLEARLY DEFINE THE INDUSTRY SEGMENT (PRIMARY PRODUCTION, MANUFACTURING, SERVICE, ETC) AND PROVIDE A BRIEF DESCRIPTION OF THE PRINCIPAL ACTIVITY OF THE BUSINESS

**BUSINESS BACKGROUND**

WHEN WAS THE BUSINESS FIRST ESTABLISHED?     HOW MANY EMPLOYEES DO YOU HAVE?

DID YOU ESTABLISH THIS BUSINESS?    YES     NO     IF NO, WHEN DID YOU ACQUIRE THE BUSINESS

WHAT IS THE OWNERS BACKGROUND, QUALIFICATIONS AND EXPERIENCE?

WHO/WHAT IS YOUR PRINCIPAL SUPPLIER?

WHO/WHAT IS YOUR PRINCIPAL INDUSTRY AND MARKET?

LIST AND EXPLAIN THE TOP THREE RISKS OF YOUR BUSINESS. ie reliance on major supplier and/or customer

1.

2.

3.

GST COMPLIANCE [Please (✓) as appropriate]

- DO YOU HAVE SYSTEMS IN PLACE TO MEET GST AND PAYG REPORTING COMMITMENTS?    YES     NO
- ARE YOUR BUSINESS ACTIVITY STATEMENT LODGING REQUIREMENTS BEING MET?    YES     NO
- ARE PROVISIONS MADE FOR TAXATION COMMITMENTS AND GST REMITTANCES?    YES     NO

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

## FINANCIAL POSITION

THE FINANCIAL POSITION SECTION MUST BE COMPLETED FOR ALL BORROWERS / GUARANTORS / COMPANY DIRECTORS / TRUSTEES.

- **SINGLE APPLICANT (PRINCIPAL ASSETS HELD BY ONE INDIVIDUAL)** - SEPARATE SECTIONS TO BE COMPLETED PER APPLICANT.
- **JOINT APPLICANT (PRINCIPAL ASSETS HELD JOINTLY)** - COMBINED FINANCIAL POSITION DETAILS REQUIRED.

DOCUMENTS / RELEVANT DETAILS TO BE PROVIDED FOR VERIFICATION EG. STATEMENTS, PAY SLIPS.



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**HOUSING LOAN DETAILS**

**LOAN 1**

<b>PERSONAL</b> <input type="checkbox"/>	<b>INVESTMENT</b> <input type="checkbox"/>
LOAN TERM <input type="text"/> YRS	INTEREST ONLY TERM <input type="text"/> YRS
STANDARD VARIABLE <input type="checkbox"/>	
ASSET LINE <input type="checkbox"/>	
FIXED RATE <input type="checkbox"/>	1 YR <input type="checkbox"/> 2 YRS <input type="checkbox"/> 3 YRS <input type="checkbox"/> 5 YRS <input type="checkbox"/>
1 YEAR INTRODUCTORY FIXED <input type="checkbox"/>	
GUARANTEED RATE REQUIRED <input type="checkbox"/>	
BACK TO BASICS <input type="checkbox"/>	
BRIDGING <input type="checkbox"/>	
OTHER <input type="checkbox"/> PRODUCT NAME .....	

**OPTIONS**

**MARGIN TYPE**

COMBINED VALUE DISCOUNT

**PACKAGE TYPE**

MONEY MANAGER MY HOME  } Available on Standard Variable,  
 MONEY MANAGER MY BUSINESS & HOME  } Fixed Rate 1,2,3,5 Years and  
 } Asset Line Products only

PROFESSIONAL PACKAGE  – Existing Pro Pack customers only

**OFFSET**  A FEE APPLIES FOR THIS FACILITY

EDO ACCOUNT NUMBER .....

**LOW DOC LOAN**   
 (PACKAGE OPTIONS NOT AVAILABLE FOR LOW DOCS)

**LOAN 2**

<b>PERSONAL</b> <input type="checkbox"/>	<b>INVESTMENT</b> <input type="checkbox"/>
LOAN TERM <input type="text"/> YRS	INTEREST ONLY TERM <input type="text"/> YRS
STANDARD VARIABLE <input type="checkbox"/>	
ASSET LINE <input type="checkbox"/>	
FIXED RATE <input type="checkbox"/>	1 YR <input type="checkbox"/> 2 YRS <input type="checkbox"/> 3 YRS <input type="checkbox"/> 5 YRS <input type="checkbox"/>
1 YEAR INTRODUCTORY FIXED <input type="checkbox"/>	
GUARANTEED RATE REQUIRED <input type="checkbox"/>	
BACK TO BASICS <input type="checkbox"/>	
BRIDGING <input type="checkbox"/>	
OTHER <input type="checkbox"/> PRODUCT NAME .....	

**OPTIONS**

**MARGIN TYPE**

COMBINED VALUE DISCOUNT

**PACKAGE TYPE**

MONEY MANAGER MY HOME  } Available on Standard Variable,  
 MONEY MANAGER MY BUSINESS & HOME  } Fixed Rate 1,2,3,5 Years and  
 } Asset Line Products only

PROFESSIONAL PACKAGE  – Existing Pro Pack customers only

**OFFSET**  A FEE APPLIES FOR THIS FACILITY

EDO ACCOUNT NUMBER .....

**LOW DOC LOAN**   
 (PACKAGE OPTIONS NOT AVAILABLE FOR LOW DOCS)

**SMALL BUSINESS LOAN DETAILS**

**LOAN 1**

PRODUCT NAME

PRODUCT TYPE CODE

LOW DOC LOAN

LOAN TERM  MONTHS

FIXED RATE TERM  MONTHS

GUARANTEED RATE FEE YES  NO

REPAYMENT TYPE (✓) PRINCIPAL & INTEREST  INTEREST ONLY

IF INTEREST ONLY (I/O TERM)  MONTHS

REPAYMENT AMOUNT \$

REPAYMENT FREQUENCY (Monthly, Quarterly)

**OPTIONS**

**PACKAGE TYPE**

SMALL BUSINESS MONEY MANAGER

**OFFSET (available for Variable loans only)**

BUSINESS ACCOUNT NUMBER

BIA FOR (My Business Pkg, Options).....

Bus Chq (standalone) .....

Bus Mgmt (standalone) .....

Bus Inv (standalone) .....

**LOAN 2**

PRODUCT NAME

PRODUCT TYPE CODE

LOW DOC LOAN

LOAN TERM  MONTHS

FIXED RATE TERM  MONTHS

GUARANTEED RATE FEE YES  NO

REPAYMENT TYPE (✓) PRINCIPAL & INTEREST  INTEREST ONLY

IF INTEREST ONLY (I/O TERM)  MONTHS

REPAYMENT AMOUNT \$

REPAYMENT FREQUENCY (Monthly, Quarterly)

**OPTIONS**

**PACKAGE TYPE**

SMALL BUSINESS MONEY MANAGER

**OFFSET (available for Variable loans only)**

BUSINESS ACCOUNT NUMBER

BIA FOR (My Business Pkg, Options).....

Bus Chq (standalone) .....

Bus Mgmt (standalone) .....

Bus Inv (standalone) .....

**FIXED RATE LOANS**

All Suncorp loans, including Fixed rates can change prior to a loan being funded (Settlement) after which time the rate will be fixed for the Fixed Interest Period. This settlement process means that the interest rate quoted at the time of application can change at any time prior to settlement of the loan, depending on market forces. To secure a fixed rate for 90 days following your application, a Guaranteed Rate Fee is payable (must be capitalised to the loan). The fee is calculated as a percentage of the amount borrowed (excluding other fees which are financed by the loan). Refer to Lending Fees and Charges brochure.

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

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**As a Guarantor to this Loan we may be required by the Code of Banking Practice 2003 ('The Code') to provide you with certain financial information and documentation of the Applicant contained in the Disclosures Table. The information we are required to provide you with depends on the capacity within which you provide your Guarantee:**

**1. INDIVIDUAL GUARANTORS**

You are an Individual Guarantor if you are providing the Guarantee and Indemnity in your personal capacity. The Code requires us to provide you with copies of all the documents listed in the Disclosures Table as well as other information detailed in the Code. We will provide you with all of this information and unless you have obtained independent legal advice after receiving the information, we will not ask you to sign the Guarantee and Indemnity documents unless we have allowed you until the next day to consider the information.

**2. DIRECTOR GUARANTORS**

You are a Director Guarantor if you are providing a Guarantee and Indemnity and the Applicant for this loan is a Company of which you are a Director, BUT NOT IF YOU ARE THE SOLE DIRECTOR.

The Code provides that you have the right to receive a copy of any of the documents listed in the Disclosures Table. These documents contain important financial information in relation to the Applicant.

You may choose not to receive some or all of this information. We ask you to consider the documents listed and advise us as to which documents you would like to receive by ticking the relevant tick boxes, or discussing this matter with your Lender and advising the Lender as to which documents you would like to receive.

We will provide you with all of the information you request to the address you have indicated, upon receipt of your request. We will not ask you to sign the Guarantee and Indemnity documents unless we have allowed you until the next day to consider the information except where you:

- have obtained independent legal advice after receiving the information; or
- tell us that you do not require until the next day to consider this information.

**3. SOLE DIRECTOR AND COMPANY GUARANTORS**

You are a Sole Director Guarantor if you are providing a Guarantee and Indemnity and the Applicant for this loan is a Company of which you are the **only** Director.

A Company Guarantor exists when a company provides a guarantee for the purposes of securing any financial accommodation or facility provided by us to another person.

The Code does not require us to provide you with any of the documents listed in the Disclosures Table.

**SECURITY DETAILS**

**PROPERTY ONE**

NAME OF TITLE HOLDER/S	
PROPERTY ADDRESS	
POSTCODE	
TITLE REFERENCE/ PROPERTY DESCRIPTION	
PURCHASE PRICE / OWNERS ESTIMATE \$	

**PROPERTY TWO**

NAME OF TITLE HOLDER/S	
PROPERTY ADDRESS	
POSTCODE	
TITLE REFERENCE/ PROPERTY DESCRIPTION	
PURCHASE PRICE / OWNERS ESTIMATE \$	

**PROPERTY THREE**

NAME OF TITLE HOLDER/S	
PROPERTY ADDRESS	
POSTCODE	
TITLE REFERENCE/ PROPERTY DESCRIPTION	
PURCHASE PRICE / OWNERS ESTIMATE \$	

**PROPERTY FOUR**

NAME OF TITLE HOLDER/S	
PROPERTY ADDRESS	
POSTCODE	
TITLE REFERENCE/ PROPERTY DESCRIPTION	
PURCHASE PRICE / OWNERS ESTIMATE \$	

**OTHER FORMS OF SECURITY OFFERED (Small Business Only)**

**TAXI LICENSES**

LICENCE NO.	METER NO.
SHARE NO.	PURCHASE PRICE \$

**BILL OF SALE / CHATTEL MORTGAGE**

BUSINESS NAME
BROADBAND OR SPECIFIC

**GUARANTEE AND INDEMNITY**

**GUARANTOR 1**

TITLE
FIRST NAME
MIDDLE NAME
SURNAME
POSTAL ADDRESS

**GUARANTOR 2**

TITLE
FIRST NAME
MIDDLE NAME
SURNAME
POSTAL ADDRESS

**GUARANTOR 3**

TITLE
FIRST NAME
MIDDLE NAME
SURNAME
POSTAL ADDRESS

**GUARANTOR 4**

TITLE
FIRST NAME
MIDDLE NAME
SURNAME
POSTAL ADDRESS

**DISCLOSURE TABLE** (Tick which documents the Guarantor requires copies of)

**GUARANTOR 1**

CREDIT REPORT	<input type="checkbox"/>
FINANCIAL ACCOUNTS	<input type="checkbox"/>
LATEST STATEMENT OF ACCOUNT	<input type="checkbox"/>
UNSATISFIED NOTICE OF DEMAND	<input type="checkbox"/>

**GUARANTOR 2**

CREDIT REPORT	<input type="checkbox"/>
FINANCIAL ACCOUNTS	<input type="checkbox"/>
LATEST STATEMENT OF ACCOUNT	<input type="checkbox"/>
UNSATISFIED NOTICE OF DEMAND	<input type="checkbox"/>

**GUARANTOR 3**

CREDIT REPORT	<input type="checkbox"/>
FINANCIAL ACCOUNTS	<input type="checkbox"/>
LATEST STATEMENT OF ACCOUNT	<input type="checkbox"/>
UNSATISFIED NOTICE OF DEMAND	<input type="checkbox"/>

**GUARANTOR 4**

CREDIT REPORT	<input type="checkbox"/>
FINANCIAL ACCOUNTS	<input type="checkbox"/>
LATEST STATEMENT OF ACCOUNT	<input type="checkbox"/>
UNSATISFIED NOTICE OF DEMAND	<input type="checkbox"/>

Please indicate how you would like to limit the amount or nature of the liabilities under your Guarantee:

**GUARANTOR 1**

PLEASE LIMIT MY GUARANTEE TO THE LOAN AMOUNT	<input type="checkbox"/>
PLEASE LIMIT MY GUARANTEE TO A SPECIFIC AMOUNT \$	<input type="checkbox"/>

**GUARANTOR 2**

PLEASE LIMIT MY GUARANTEE TO THE LOAN AMOUNT	<input type="checkbox"/>
PLEASE LIMIT MY GUARANTEE TO A SPECIFIC AMOUNT \$	<input type="checkbox"/>

**GUARANTOR 3**

PLEASE LIMIT MY GUARANTEE TO THE LOAN AMOUNT	<input type="checkbox"/>
PLEASE LIMIT MY GUARANTEE TO A SPECIFIC AMOUNT \$	<input type="checkbox"/>

**GUARANTOR 4**

PLEASE LIMIT MY GUARANTEE TO THE LOAN AMOUNT	<input type="checkbox"/>
PLEASE LIMIT MY GUARANTEE TO A SPECIFIC AMOUNT \$	<input type="checkbox"/>

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PRIVACY STATEMENT

Suncorp is an Allfinanz group offering many different categories of financial products and services in banking, insurance, investments and advice on financial services.

We need to collect personal information from our customers so we can,

- set up and administer a product for the customer,
• determine a customer's requirements and provide the appropriate product or service,
• assess a claim made by a customer under one or more of our products,
• assess our customers and their needs,
• improve our financial products and services.

Without this information, we cannot provide the product or service.

Protecting the privacy of our customers is a key part of our normal operations.

As one of a number of companies that form the Suncorp Group, we provide personal information about a customer to all the related companies within this group. We do not disclose personal information to any outside third party organisation, unless it is contracted to Suncorp to provide administrative services or activities on our behalf.

Sometimes, Suncorp might use personal information to make product related material on a range of financial products and services available to our customers. A customer may elect not to receive product related material by indicating in the acknowledgment and declarations section of this form.

A customer may,

- change their mind at any time about receiving product related material,
• access the personal information that we hold about them,
• get more information about Suncorp,
• obtain a copy of our Privacy Policy,

by calling 13 11 55, or contacting us at suncorp.com.au or by visiting any of our branches.

AUTHORITY TO OBTAIN CREDIT INFORMATION

I/We understand that by signing this application, consent is given to Suncorp-Metway Ltd ABN 66 010 831 722 (Suncorp) to:

- Disclose to a credit reporting agency certain personal information about me/us including: identity particulars; amount of credit applied for in this application; payments which may become more than 60 days overdue; any serious credit infringement which Suncorp believes I/we have committed, advice that payments are no longer overdue and/or that credit provided to me/us has been discharged.
• Obtain from a credit reporting agency a report containing personal credit information about me/us and, a report containing information about my/our commercial activities or commercial credit worthiness, to enable Suncorp to assess this application for credit.
• Give and obtain from any credit provider(s) that may be named in this application or in a report held by a credit reporting agency information about my/our credit arrangements, including information about my/our credit worthiness, credit standing, credit history, credit capacity for the purpose of assessing an application for credit, notifying any default by me/us.
• Give to any guarantor, proposed Guarantor or person providing security for a loan given by Suncorp to me/us, any credit information they may reasonably request. This includes but is not limited to the information about and copies of the following items:
- this and any credit contract or security contract I/we have or had with the Bank,
- application information including any financial statements or statements of financial position given to us within the last 2 years,
- any credit report or related credit report obtained from a credit reporting agency,
- a copy of any related credit insurance contract,
- any default notices, statements of account, or dishonour notice on this or any related facility I/we have or had with the Bank,
- any other information we have that they may reasonably request.

We further acknowledge this authority extends to include any information in the Bank's possession relating to the preceding 2 years and continues for the life of the facility now requested.

- Authorise Suncorp to disclose a report or information to a mortgage insurer to assess whether to provide insurance to Suncorp or the risk of insuring Suncorp for the loan given to me/us, or to assess the risk of default by me/us under the contract of mortgage insurance between Suncorp and the mortgage insurance company.
• Confirm my employment details from my employer, accountant or tax agent named in this application.
• Confirm my income received on an investment property from any nominated real estate agent.

DECLARATION (✓)

- Have you ever been or are you currently bankrupt or insolvent or is bankruptcy pending against you, or have you ever assigned your estate or entered into any compromise for the benefit of creditors? ..... Yes [ ] No [ ]
• Is there an unsatisfied judgement entered, or a judgement likely to be entered, in any court against you, or any company of which you are, or were, a shareholder or officer? ..... Yes [ ] No [ ]

If you have answered 'Yes' to any of the above, please give details.

Table with 6 empty rows for providing details.

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

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**APPOINTMENT OF AN AGENT**

I/We appoint the Broker identified on page 1 of this application and any organisation under which the agent may operate or by whom the agent may be employed or their assigns, to be my/our agent for the purpose of obtaining information from Suncorp about my/our application, credit report, home loan balance from time to time and associated information relevant to the calculation of commission.

**BUSINESS PURPOSE DECLARATION**

For Split Loans, this business or investment declaration only applies to Loan  APPLICATION/ACCOUNT NO.

I/We declare that the credit to be provided to me/us by Suncorp is to be applied wholly or predominantly for business purposes or investment purposes (or for both purposes)

**IMPORTANT**

You should **NOT** sign this declaration unless the loan is wholly or predominantly for business or investment purposes.  
By signing this declaration you may **LOSE** your protection under the Consumer Credit Code.

<b>APPLICANT SIGNATURE</b>	DATE	<b>JOINT APPLICANT SIGNATURE</b>	DATE
<input checked="" type="text"/>	<input type="text"/>	<input checked="" type="text"/>	<input type="text"/>
NAME <input type="text"/>		NAME <input type="text"/>	

**JOINT NOMINATION**

By signing this application, I/we nominate  One Name Only  
to receive notices and other documents under the Consumer Credit Code on behalf of me/all of us.  
Each Borrower is entitled to receive a copy of any notice or other document under the Consumer Credit Code and that by inserting the name of one of the applicants in this Joint Nomination section and signing the Declaration section of this page, you are giving up the right to be provided with information direct from Suncorp.

<b>SIGNATURE</b>	DATE	<b>SIGNATURE</b>	DATE
<input checked="" type="text"/>	<input type="text"/>	<input checked="" type="text"/>	<input type="text"/>
NAME <input type="text"/>		NAME <input type="text"/>	

**ACKNOWLEDGMENTS & DECLARATIONS**

By signing below, I/we agree that I/we,

- have read and understood this application;
- declare that all information provided in this application is true and correct;
- authorise Suncorp to make any enquiries it considers necessary to verify the information provided in this application and in support of this application;
- agree to Suncorp collecting, using and disclosing my/our personal information, including health and sensitive information if applicable, in accordance with the Privacy Statement included in this application and the Suncorp Privacy Policy;
- consent to the disclosures set out in the Authority to Obtain Credit Information;
- consent to Suncorp disclosing information about my/our application, credit report, home loan balance from time to time and associated information relevant to the calculation of commission to the agent nominated in this application and to any organisation under which the agent may operate or by whom the agent is employed;
- agree to Suncorp transmitting my/our personal information by electronic means;
- have been offered the opportunity to be contacted by a Suncorp Financial Adviser to review my/our full financial requirements;
- COMPANY AND TRUSTEE BORROWERS - have read and understood "IMPORTANT INFORMATION FOR COMPANY AND TRUSTEE BORROWERS"
- For Broker introduced loans – where a package box is ticked and/or the CCI box is ticked, I request Suncorp to contact me.

<b>APPLICANT/GUARANTOR</b>	<b>JOINT APPLICANT/GUARANTOR</b>
Do not send me product material <input type="checkbox"/>	Do not send me product material <input type="checkbox"/>
<b>SIGNATURE</b>	<b>SIGNATURE</b>
<input checked="" type="text"/>	<input checked="" type="text"/>
DATE <input type="text"/>	DATE <input type="text"/>
NAME <input type="text"/>	NAME <input type="text"/>
<b>JOINT APPLICANT/GUARANTOR</b>	<b>JOINT APPLICANT/GUARANTOR</b>
Do not send me product material <input type="checkbox"/>	Do not send me product material <input type="checkbox"/>
<b>SIGNATURE</b>	<b>SIGNATURE</b>
<input checked="" type="text"/>	<input checked="" type="text"/>
DATE <input type="text"/>	DATE <input type="text"/>
NAME <input type="text"/>	NAME <input type="text"/>

**INTERVIEWER**

NAME (PLEASE PRINT IN BLOCK LETTERS)	<b>SIGNATURE</b>	DATE
<input type="text"/>	<input checked="" type="text"/>	<input type="text"/>

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

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## ID Reference Documents

Under the Financial Transactions Reporting Act we are required to obtain suitable identification from you before we can open an account. The 100 point check is based on allocating points between 25 and 100 to certain identification documents. For you to be sufficiently identified you must present documents with a minimum total value of 100 points. To obtain the 100 points, there must be at least one form of identification from Category A (see table below) and if 100 points not achieved, further documents from Category A and/or Category B until 100 points has been achieved.

**Note:**

- Original documents must be sighted. Photocopies are not acceptable.
- Only one of Passport, Birth Certificate, NSW Birth Card or Citizenship Certificate is acceptable. E.g. can not accept both a Passport and a Birth Certificate.
- Unless otherwise indicated, only current identification is acceptable. Document with an expiry date must be current at the time of presentation.
- Suncorp reserves the right to request additional identification to satisfy the opening of an account.

The table below shows examples of the type of identification that may be accepted in each category. Please contact us on **13 11 55** if you need to find out other alternative identification documents that you can use.

ACCEPTABLE ID	
Points	Category A Documents
100	FTRA Identification Reference * This is a written reference provided by an Acceptable Referee. * The identification document details examined must be recorded on the form * Acceptable referee details must be entered in the "Issued By" Field
100	Under 18: Birth Certificate (full or extract is acceptable) Under 18: Passport (current or expired within 2 years) Under 18: Education Institution * Must include: stamp/seal of the institution, specifies the name of the child, confirms attendance, signed by either the Principle, Head Teacher or Chief Administrator Under 18: Citizenship Certificate
100	Centrelink Letter of Introduction or Form SF104 * Customer identity is verified by a Letter of Introduction or Form SF104 issued by the Department of Social Security within the last 3 months, signed by both the customer and an officer from the department
100	Recent Arrival in Australia – Passport * Confirmation of the name of the customer and that the customer has been in Australia for less than 6 weeks <b>Note:</b> Full 100 pt check is required where the customer has been in Australia for more than 6 weeks Recent Arrival in Australia – Other Travel Document Another current identity document, having the characteristics of a passport, issued to the person by a government
100	Verifying Officer
100	Isolated Area Aborigine * For Aborigines who reside in an isolated area, i.e. a place at least 100 kms from the nearest urban centre, obtain statements from 2 Aborigine/Torres Strait Islander community Leaders of a community to which the Customer belongs verifying the identity of the customer <b>Note:</b> an urban Centre is one with a census population of not less than 2500
70	Passport (Australian or Foreign) – current or expired within 2 years <b>Note:</b> only one of Passport, Birth Certificate, NSW Birth Card or Citizenship Certificate is acceptable
70	NSW Birth Card – <b>Note:</b> only one of Passport, Birth Certificate, NSW Birth Card or Citizenship Certificate is acceptable
40	Drivers Licence – Photo & Signature (current Australian) * Licence or permit issued in Australia only
40	Tertiary Education ID Card – Photo or Signature (issued by a Tertiary Institution)
40	Government Card with photo or signature as Evidence of Financial Benefit * Example, Pension Card
40	Centrelink – Card Entitlement to Financial Benefit – Photo or Signature * Example, Newstart
40	Written reference from another Financial Institution (signed by signatory and the person giving it) – Place of Issue
40	Public Employee ID Card – Photo or Signature

<b>ACCEPTABLE ID (continued)</b>	
<b>Points</b>	<b>Category A Documents</b>
40	Reference from Suncorp Staff * Known customer for at least 1 year
40	Department Immigration & Multicultural & Indigenous Affairs Visa (DIMIA) – Photo or Signature
35	Letter from Employer (on letterhead, signed by signatory and employer)
35	Council Rates Notice (Owner/Occupier Stated) * Rates notice must contain the full name of the signatory, eg. John Smith as opposed to J Smith. For a rates notice to be worth 35 points it must state that the signatory is the owner or occupier of the property to which the notice was sent and the document is current
<b>Points</b>	<b>Category B Documents</b>
70	Birth Certificate * Full or Extract is acceptable. Note: only one of Passport, Birth Certificate, NSW Birth Card or Citizenship Certificate is acceptable. E.g. can not accept both Passport and Birth Certificate.
70	Citizenship Certificate – Note: only one of Passport, Birth Certificate, NSW Birth Card or Citizenship Certificate is acceptable
40	Other Licence – Photo or Signature – Current Australian Only
35	Title Search (with signatories full name)
35	Mortgage Documents – Suncorp or any other Financial Institution (with signatories full name)
35	CRL Credit Reference Report (with signatories full name and address)
25	Council Rates Notice – Rates notice must contain the full name of the signatory, eg. John Smith as opposed to J Smith
25	Credit/Debit ATM Cards – Australian Only * Only 1 identification document per institution can be accepted
25	Medicare Card
25	Education Institution Records * Over 18, no Photo or Signature
25	Employment ID Card – Name Only
25	Marriage Certificate
25	Phone, Electricity or Gas A/C
25	Other Financial Institution Record * Example Bank Statement, Only 1 identification document per institution can be accepted
25	Health Care Card – Centrelink/Veterans Affairs
25	Passbook Account – Another Financial Institution
25	Member Records of a Professional or Trade Association * Copy of Document
25	Telephone Directory & Phone Customer * Check entry in white pages, telephone to confirm
25	Membership Card – Issued in Australia Only eg. Video Store card, RSL Club, Organisation/Sporting groups etc.
25	International Drivers Licence – Current only * Licence must be issued by another country to drive in that country. eg. Canadian drivers licence issued in Canada.
25	Department Immigration & Multicultural & Indigenous Affairs Visa (DIMIA) – No Photo or Signature
25	Income Tax Assessment
25	Lease Agreement or Rental Receipt
25	TAB Card – Photo & Signature
25	Proof of Age 18+ Card – Photo & Signature
25	NSW Photo ID card

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# New Account Application Personal For Suncorp Use Only

## Account Details

New Account Number(s)	<input type="text"/>	<input type="text"/>	Date	<input type="text"/>
Account Title	<input type="text"/>			
Existing Account Number	<input type="text"/>			

## Declaration and Consent

I/We understand it is an offence under the "Financial Transactions Reports Act 1988" to make a false or misleading statement.  
 I/We agree to be bound by the Terms and Conditions detailed in the Product Disclosure Statement in relation to accounts opened under the above account name. I/We confirm the details supplied are correct.

By signing this application, I/we agree to Suncorp collecting, using and disclosing my/our personal information, including sensitive and health information if applicable, in accordance with the Privacy Statement included in this document and the Suncorp Privacy Policy.

Sometimes, Suncorp might use personal information to make product-related material on a range of financial products and services available to our customers. A customer may elect not to receive product-related material by indicating in Customer Details Section.

## Tax File Numbers

Unless otherwise directed, a Tax File Number, where provided, will be applied to all accounts opened under this account name. The providing of Tax File Numbers is optional under taxation legislation. If you do not quote a tax file number, tax may be deducted from the interest earned on the account at the highest marginal rate. Further information can be obtained from the Australian Taxation Office.

## Customer Signatures

<b>1</b> Title	Given Name(s)	Surname	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>1</b> Password	Cust. No. (OFFICE USE ONLY)		
<input type="text"/>	<input type="text"/>		
Do not send me product material <input type="checkbox"/>			
<b>2</b> Title	Given Name(s)	Surname	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>2</b> Password	Cust. No. (OFFICE USE ONLY)		
<input type="text"/>	<input type="text"/>		
Do not send me product material <input type="checkbox"/>			

## Number to Sign to Operate

Any  of the customers specified above can operate on this account.

Product Name

## Office Use Only

**Mortgage Offset** (Everyday Options Accounts only)

Loan Account Number

PLEASE COMPLETE ALL SECTIONS OF APPLICATION, IF NOT APPLICABLE MARK N/A

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# Direct Debit Request Retail

**Suncorp-Metway Ltd**  
**GPO Box 1453**  
**Brisbane QLD 4001**

Date

New Request  Change  Cancellation

Debit User Number

I/We

Surname or Company Name

Given Names or ABN/ARBN Number

(  )

Contact Telephone Number

Authorise and request the Debit User detailed above, to debit my/our account via the Bulk Electronic Clearing System from time to time in accordance with the instructions detailed in the Schedule below and on the terms set out on the DDR Service Agreement overleaf.

I/We have read and understand the information contained in the DDR Service Agreement overleaf.

Signature of Customer(s)

(If joint account all signatures may be required. If in doubt please refer to your Financial Institution).

## THE SCHEDULE

**Direct Debit Type** Please tick (✓) one only

I request that you debit our account as follows:

**Minimum repayment from external account**  (In accordance with the DDR Service Agreement)  
*The bank will automatically adjust the transfer to be equal to the minimum repayment amount.*

OR

**Fixed amount from external account**  The amount nominated will remain fixed, even when interest rates or the loan balance changes, unless you request this amount to be changed.

**Account to be Debited** (NOTE: Direct Debiting is not available on the full range of accounts. If in doubt please refer to your Financial Institution)

BSB Number <input type="text" value=": :"/> - <input type="text" value=": :"/>	Account Number <input type="text"/>
Account Title <input type="text"/>	Financial Institution <input type="text"/>
Reference Details <input type="text"/>	Amount \$ <input type="text"/>

**Frequency and Date** Please tick (✓) one only

Once Only  Daily  Weekly  Fortnightly  Monthly  Month End  Quarterly  Half Yearly

Note: For 'Interest Only' Loans, payment can only be scheduled once per month on due date.

Start Date  Expiry Date

**Suncorp Loan Account to be Credited with the Payment**

Loan Account Number <input type="text" value=": : : : : :"/>
Account Name <input type="text"/>

### BRANCH USE ONLY

<b>Completing Branch Details</b>	<input type="text"/>	<input type="text"/>		
	Completing Branch Name & Branch Number	Completed By (User Name & User Number)		
<b>Processing Details</b>	Date Received <input type="text" value=": : : : : :"/>	Date Processed <input type="text" value=": : : : : :"/>	Processed By <input type="text"/>	User ID <input type="text"/>

White – Customer Copy      Yellow – Processing Copy

**Principle and Interest Loans:**  
**Add:** Branch to process DDR and send to Records RE039.  
**Change:** Branch to process DDR and send to Records RE039.  
**Delete:** Branch to process DDR and send to Records RE039.

**Interest Only Loans:**  
**Add:** **Existing Loans:** Send DDR to Loans Accounting RE047 to be processed.  
**Unfunded Loans:** Send DDR to Retail Securities RE025 to be processed and retained on all new loan files.  
**Change:** Branch to process DDR and send to Records IPC RE039.  
**Delete:** Send DDR to Loans Accounting RE047 to be processed.

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## DDR Service Agreement

This DDR Service Agreement forms part of the terms of the Direct Debit Request ("DDR") and should be read in conjunction with the DDR form.

### DDR - Suncorp Loans

You can arrange to pay your loan repayments by DDR.

We will process a direct debit to the account nominated on the DDR for the value of your loan repayment (plus any applicable Government charges, GST and bank processing fees) on the date that it is due in accordance with the terms and conditions of your loan.

Unless you have nominated a fixed payment amount on the DDR, if your loan repayment amount changes, we will automatically change the amount of your DDR in accordance with your new repayment amount.

If you have nominated a fixed amount on the DDR and your loan repayment changes so the fixed amount is insufficient, you are responsible for changing your DDR in accordance with your new repayment amount.

You will be notified of any changes in your loan repayment amount in accordance with the terms and conditions of your loan.

### Changing your DDR Authority

We will provide you with 14 days notice if we change any of the terms of the DDR.

### Stopping or Cancelling your DDR

You may defer, alter, stop or cancel your DDR at any time by providing at least 5 business days notification in writing to any Suncorp Branch or mail to:-

### For existing Interest Only Loans

The Manager, Loans Accounting  
Suncorp-Metway Ltd  
RE047, GPO Box 1453  
Brisbane QLD 4000  
Or telephone us on **13 11 55**.

Alternatively, you may request a stop or cancellation by contacting your Financial Institution.

Requests to vary the details of the account to be debited **must** be in writing and in terms of the operating authority for the account.

### DDR Dispute Resolution

If you wish to dispute a DDR transaction you can contact us as follows and we will arrange for your disputed transaction to be investigated and where appropriate, for a correction to be made.

### For existing interest only loans

The Manager, Loans Accounting  
Suncorp-Metway Ltd  
RE047, GPO Box 1453  
Brisbane QLD 4000  
Or telephone us on **13 11 55**.

Alternatively, you may dispute a DDR transaction by contacting your Financial Institution.

If we are unable to resolve the dispute to Your satisfaction You should contact the financial institution where the account to be debited is held to complete and lodge a DDR Customer Claim form. If the account to be debited is at Suncorp Metway, a Claim Form may be obtained from any Suncorp Branch or by telephone on **13 11 55**, and then lodged with;

Supervisor Card Services  
Suncorp-Metway Ltd  
GPO Box 1453  
BRISBANE QLD 4001

### Non Business Days

If your DDR falls due on a weekend or public holiday we will process it on the next business day.

If you are uncertain of the date your DDR will be processed you should contact us on telephone **13 11 55** or your financial institution.

### Returned or Dishonoured DDR's

If your DDR is dishonoured or returned unpaid by your financial institution for any reason we reserve the right to recover the funds from you and to charge a dishonour fee in accordance with our standard terms and conditions.

### Clear Funds

You should ensure that you have sufficient clear funds in your Account to enable the DDR to be paid by your financial institution.

### Your Records

We will not disclose any details of your DDR to any person or corporation unless required to do so by law or unless the information is required in relation to a disputed transaction.

### Your Account

You should be aware that some financial institutions may not allow a DDR to be processed to certain types of accounts.

You should check your account details against a recent statement from your financial institution or check with your financial institution to ensure that a DDR can be processed to your account.

### If you wish to make inquiries about your DDR

You may contact any Suncorp branch.

Or via telephone on **13 11 55**.

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**Financial Institution** (financing to)   
**ABN** (if known)

**Discharge Authority**

**Borrower Details**

Borrower name(s) in full:

Name of borrower to be contacted:  Daytime contact phone number:

Mailing address for all correspondence after Settlement:  State:  Postcode:

Customer No. (if applicable)

**Settlement Details**

Settlement Date:  Settlement location:

In the boxes below please specify the Loan/Facility(s) account number(s) and whether the Loan/Facility(s) is to be paid out in full.

Loan/Facility account number:  Is to be paid out in full Yes  No  If No, the desired amount to be paid is \$

Is to be paid out in full Yes  No  If No, the desired amount to be paid is \$

Is to be paid out in full Yes  No  If No, the desired amount to be paid is \$

\*Please note: Additional documentation will be required for Partial discharge, and the customer will be contacted directly.

Certificate of Title reference:  Mortgage No.

**Solicitor/Conveyancer/Refinance Agent:**

Company Name & Contact Name (in full):

Name of current Financial Institution:  Phone No.

Contact Name: (if known)  Fax No.

Address of property(ies) being refinanced:  State:  Postcode:

Address of property(ies) being refinanced:  State:  Postcode:

**Declaration Note: This declaration is to be signed by all the parties to the Loan/Facility(s), both borrowers and guarantors.**

I/We/The Company request that any surplus funds after settlement be placed in the following account: Bank

Account Name:  BSB & Account No.

I/We/The Company:

- Understand that if any error has been made in calculating the settlement amount, that I/we/the Company is/are liable for any amount outstanding.
- Authorise the current Financial Institution specified above to provide ..... (new FI) with any information they require about this account and to hand Loan/Facility(s) documentation to ..... (new FI) upon settlement.
- Authorise the current Financial Institution to charge the applicable fees in accordance with the Terms & Conditions of my/our loan.

Full Name: (please print)   Borrower  Guarantor

Signature:  Date:

Full Name: (please print)   Borrower  Guarantor

Signature:  Date:

Full Name: (please print)   Borrower  Guarantor

Signature:  Date:

Full Name: (please print)   Borrower  Guarantor

Signature:  Date:

**To be completed by Financial Institution refinancing this facility**

Authorising Officer Manager's Name:  Branch Name:  Date:

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