

# Access Authority to Operate



<b>1) Authority to Operate (ATO) Details:</b>			
Surname		Member Number	
Given Name(s)			
<b>2) Linked Membership (Owner) Details:</b>			
Surname		Member Number	
Given Name(s)			
<b>3) Account/Access Selection – I want access to the following account(s) and access option(s):</b>			
Transaction Accounts	Savings Accounts	Access options	Mortgage Offset Accounts
<input type="checkbox"/> Redi Access Account (S1) <input type="checkbox"/> Master Club (S3) <input type="checkbox"/> MyLimit Pre-paid (S29) <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____	<input type="checkbox"/> Beans Savings (S4) <input type="checkbox"/> Focus Saver (S5) <input type="checkbox"/> iSavings (S12) <input type="checkbox"/> Super MyWay (S65) <input type="checkbox"/> Other _____ <input type="checkbox"/> Term Deposit (I)____	<input type="checkbox"/> Visa Debit Card Link to A/c _____ <input type="checkbox"/> Cheque Book Link to A/c _____ <input type="checkbox"/> MyLimit Pre-Paid Visa Debit Card - Linked to S29	<input type="checkbox"/> Mortgage Offset (S14) Link to _____
<b>4) Teleservice Code – This validates who you are when you speak to one of our friendly staff over the phone:</b>			
Please nominate a 4 digit code		<input type="checkbox"/> I want Teleservice access to an account with 2 or more to sign	Please note teleservice access is limited where an account requires at least two to sign
<b>5) IVY Phone Banking – I want to be able to access my account(s) via IVY the 24 hour automated phone banking service:</b>			
Please nominate a 4 digit code <u>You will be required to change this when you first access IVY</u>		<input type="checkbox"/> I want access to all my accounts	Please note this service is not available on accounts which require at least two or more to sign
<b>6) Internet/Mobile Banking – I want to be able to access my account(s) online:</b>			
Please nominate a <b>temporary password</b> , it must contain 5-8 characters with a combination of letters and at least 2 numbers. When you first log in to Internet Banking you will be required to change this password.			
<b>Example: SPIKE87</b>			
<input type="checkbox"/> I would like to be able to transfer funds to other Financial Institutions and therefore must subscribe to <b>SMS One Time Password</b>			
<input type="checkbox"/> I wish to be able to view my statements online only (I do not wish to receive paper based statements in the post)			
<b>7) Term Deposit – I want this Fixed Term Deposit:</b>			
Amount		Months	Rate
		<input type="checkbox"/> Interest to be paid on Maturity/Annually	
Regular Interest Payment Options		<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	
<input type="checkbox"/> Tax File Number/Exemption Provided		<input type="checkbox"/> Transfer to another Financial Institution	
Interest Instructions	<input type="checkbox"/> Compound	<input type="checkbox"/> Internal Transfer to Member Number/Acc	
Details	BSB	Account	Name
Reference	Shortly before your investment matures we will contact you to discuss your maturity options		

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## 8) Additional Products & Services - I would like more information on:

Loans	<input type="checkbox"/> Home Loan	<input type="checkbox"/> Personal Loan	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Line of Credit	<input type="checkbox"/> Overdraft	<input type="checkbox"/> Investment/Business Loans
Insurances	<input type="checkbox"/> Car	<input type="checkbox"/> Home & Contents	<input type="checkbox"/> Travel	<input type="checkbox"/> Landlord	<input type="checkbox"/> Caravan	<input type="checkbox"/> Boat
<input type="checkbox"/> - Please tick this box if you'd like a free no obligation Insurance quote on any of the products listed above						
Foreign Currency Needs	<input type="checkbox"/> Foreign Currency	<input type="checkbox"/> Cash Passport	<input type="checkbox"/> Bank Draft	<input type="checkbox"/> Telegraphic Transfer Outward/Inward		
Conveyancing Needs	<input type="checkbox"/> Settlements	<input type="checkbox"/> Mortgages	<input type="checkbox"/> Land Divisions	<input type="checkbox"/> Contracts	<input type="checkbox"/> Business Settlements	

## 9) Signatory Conditions:

I agree to be bound by the Terms & Conditions of the products requested, and now supplied to me, and acknowledge that my signature on this application form signifies acceptance of these Terms & Conditions.

**IMPORTANT:** If at any time you suspect someone else has gained access to your Internet Banking code, immediately call us on 1300 131 844 during business hours or on 1300 247 489 after hours. Any delay in notification may increase your liability in the case of unauthorised transactions.

Visa Card holders must be over 18 years of age and a signatory to the membership. Prepaid Visa is available for any card holder over 14 years. Visa Declaration: I/We request to be issued with a Visa and PIN to enable me/us to access my account through ATMs and other Electronic and Non Electronic remote access devices and outlets accepting Visa. I/We agree to be bound by the Conditions of Use now supplied to me/us and acknowledge my/our signature on this application form signifies acceptance of these Conditions of Use. If Conditions of Use have not been provided, please ask a staff member before signing this document. I/We authorise the Credit Union to verify any information supplied by me/us in conjunction with this application. \*Approval conditions apply.

### By signing this form, you understand the conditions regarding Authority to Access:

You are appointing the person whose name and signature appears as an additional signatory to the account.

You acknowledge that Police Credit Union is released from all liability arising from loss or damage caused by the person authorised to operate the account;

- That any liability in connection with the operation of the account will be joint and several;
- That the authority remains in force until you notify Police Credit Union of cancellation

## 10) Authority to Operate (ATO) Signature:

<b>ATO Signature</b> <i>Authority to Operate</i>			
Member Number		Date	

## 11) Account Owner Signature(s) – If the account is 2 to sign, both parties must sign:

<b>Member Signature</b> <i>Account Owner/Operator</i>			
Member Number		Date	
<b>Member Signature</b> <i>Account Owner/Operator</i>			
Member Number		Date	