



# Change of Business Address Authority

## Company or Incorporated Body

Account name ('the customer')

  

Date

(insert trading name ('trading as') if trading under a business name.)

ACN/ABN

To: Australia and New Zealand Banking Group Limited ABN 11 005 357 522 ('ANZ')

We certify that the following resolution was passed at a meeting of the board of Directors of the Customer on

 /  / 

and has been recorded in the minute book.

### Resolved that:

The Directors inform you that the business address has changed.

## For individuals (including sole proprietor, firms, partnerships)

Account name ('the customer')

  

Date

(insert trading name ('trading as') if trading under a business name).

## 1. Change of business address

### Original business address

Please fill in details below for the existing business addresses that will need to change

#### Business address:

Street (including street number)

Suburb/town

State

Postcode

#### Registered office address (if different from above):

Street (including street number)

Suburb/town

State

Postcode

#### Postal address:

Street (including street number)

Suburb/town

State

Postcode

## New business address

Please fill in new business address details below. For those details that remain the same, please leave the field blank.

### Business address:

Street (including street number)

Suburb/town

State

Postcode

### Registered office address (if different from above):

Street (including street number)

Suburb/town

State

Postcode

### Postal address:

Street (including street number)

Suburb/town

State

Postcode

## New contact details

Please fill in details below for the contact details, which have changed. (For those that remain the same, please leave the field blank.)

Business telephone number:

Business fax number:

Business mobile number:

## 2. Linked account details

Do you want the change of business address(es) that you informed us of above to apply to all accounts linked to this Customer Registration Number?

yes      no

If no, to which accounts will the change of business address information apply?

### Account number one:

Account Name

Account Number

BSB

### Account number two:

Account Name

Account Number

BSB

### Account number three:

Account Name

Account Number

BSB

## Customer signature - Company or Incorporated Body

Chairman/Director/Other authorised officer's signature

Secretary/Other authorised officer's signature

**Note: To be signed by the Chairman/Director and Secretary where the Customer is a company. If the Customer is an incorporated Society, incorporated Lodge, etc, the form should be signed by those parties nominated under the Rules/Constitution as governing the body, including one party who holds the deciding vote in the case of tied votes.**

## Required signatories - Individual (including Sole Proprietor, Firms, Partnerships)

This section must be signed in accordance with the signing authorities that you have advised to ANZ.  
eg: if two or more signatures are required.

Full name (surname first)

  

Office/title

  

Specimen signature

Full name (surname first)

  

Office/title

  

Specimen signature

Full name (surname first)

  

Office/title

  

Specimen signature

Full name (surname first)

  

Office/title

  

Specimen signature

Full name (surname first)

  

Office/title

  

Specimen signature

## ANZ officer who completed this Authority

I have checked:

- > that all sections of this form have been properly completed
- > the customer(s) signature(s) above against the branch signature card and I am satisfied that they match

Salary number

Surname

Given name

Signature

BSB number

Date received

Recorded by

Checked by