

Close an ANZ First Home Saver Account - Bankruptcy

Customer's personal details			
Title			
Given name(s)			
Surname			
Customer's ANZ First Home Saver Account number			
Trustee's Details			
Name of trustee			
Contact telephone number			
Account number to transfer paymen	to		
Payment amount			
Full name:			
Signature:			
Date: /	/		
Please enclose evidence that you l	ave been appointed as tr	rustee by a court.	
Payment details			
Transfer funds to:			BSB
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		sed)	Account number
☐ Transfer a partial amount			\$
Please forward to:			
ANZ First Home Saver Account Private Bag 5 Collins Street West Melbourne VIC 8007			
Office use only			
Date account closed			
Closing/payment reason code			
Payment amount			
rayment amount			
Payment date			
		Reason code	Explanation
Payment date		Reason code	Explanation Bankruptcy trustee payment – you must sight bankruptcy evidence