

## Welcome to Esanda. Applying is easy.

### 1. Apply

- Fill in your personal details (if a joint account, both applicants need to complete)
- Provide us with the details of your existing personal bank account that you would like us to pay your interest and principal into (referred to as your Nominated Account). Please note your nominated account cannot be changed for the life of the Esanda Term Deposit.
- Complete the Identification by Certified Copy form if you are not an existing ANZ customer and forward with your application (if a joint account, both applicants need to complete).
- Please read the Esanda Term Deposit Terms and Conditions (that can be accessed from [www.anz.com](http://www.anz.com)). Then sign the Declaration (if a joint account, both need to sign).

### Esanda Term Deposit checklist

You must:

- be aged 16 years or over
- be an Australian citizen or a foreign citizen living in Australia,
- have an account with an Australian Financial Institution. This account must have a BSB and an account number so it can be used as the Nominated Account for your Esanda Term Deposit . Your Nominated Account must be in exactly the same name(s) as your Esanda Term Deposit. For joint accounts, the Nominated Account must also be in the same joint names.

### 2. Send your application and identification documents (if required)

Please ensure you have completed all sections of the application form and the Identification by Certified Copies form for each applicant (if required). Mail all documents (postage stamp not required) to:

To: **Esanda Term Deposit**  
**Reply Paid 65398**  
**Collins Street West**  
**Melbourne VIC 8007**

### Your Details

#### Applicant 1

\_\_\_\_\_  
 Title Surname

\_\_\_\_\_  
 First name

\_\_\_\_\_  
 Middle name

\_\_\_\_\_  
 Date of birth Gender  Male  Female

#### Residential address (PO Box not acceptable)

\_\_\_\_\_  
 Unit number Street number

\_\_\_\_\_  
 Street name

\_\_\_\_\_  
 Suburb State Postcode

#### ✉ Mailing address (if different to your residential address)

\_\_\_\_\_  
 Unit number Street number Street name

\_\_\_\_\_  
 Suburb State Postcode

#### Applicant 2 (if applicable)

\_\_\_\_\_  
 Title Surname

\_\_\_\_\_  
 First name

\_\_\_\_\_  
 Middle name

\_\_\_\_\_  
 Date of birth Gender  Male  Female

#### Residential address (PO Box not acceptable)

\_\_\_\_\_  
 Unit number Street number

\_\_\_\_\_  
 Street name

\_\_\_\_\_  
 Suburb State Postcode

#### ✉ Mailing address (if different to your residential address)

\_\_\_\_\_  
 Unit number Street number Street name

\_\_\_\_\_  
 Suburb State Postcode

**Applicant 1** continue

Contact number

Alternative contact number

Email address

Are you an existing ANZ customer?  Yes  No

If yes, please note your Account number

If 'no' please complete the Identification by certified Copy form and return with your application

Security Code (This should be letters or numbers or a combination of both and a maximum of 9 characters)

Please note you will need to quote this security code when dealing with us over the phone. You must keep your security code safe and confidential at all times. If you are an existing ANZ customer you are not required to provide a security code.

**Applicant 2** continue

Contact number

Alternative contact number

Email address

Are you an existing ANZ customer?  Yes  No

If yes, please note your Account number

If 'no' please complete the Identification by certified Copy form and return with your application

Security Code (This should be letters or numbers or a combination of both and a maximum of 9 characters)

**Tax File Number details**

It is not compulsory for you to provide your TFN. However, if you choose not to do so, we are required to deduct withholding tax from interest earned unless you are in an exempt category. If you choose to supply us with your TFN(s) or exemption code, please complete the details below.

**Applicant 1**

**Applicant 2 (if applicable)**

Tax file number (TFN) or Exemption Code

Tax file number (TFN) or Exemption Code

**Your opening deposit**

Please attach a cheque payable to ANZ for the amount entered below. Cheques should be made payable to Australia and New Zealand Banking Group Limited and marked 'not negotiable':

\$

You'll need to write your full name (the name(s) provided on the application) address and date of birth on the reverse side of the cheque.

**Your investment details**

Interest rate . %p.a

**Interest Frequency**

Please select the frequency you wish to receive your interest payments

Monthly Quarterly Half-yearly Yearly At Maturity

**How would you like to receive your interest payments?**

Re-invest automatically

Deposit to Nominated Account

\*Please note automatic reinvestment of interest is only available for "At Maturity" interest frequency

**Please select the term you wish to invest for:**

30 days 90 days 180 days 1 year 2 years

3 years 4 years 5 years Other/ Special Term (please specify)

## Nominated Account details

Account name (This account must be in exactly the same name(s) as the Esanda Term Deposit)

Name of financial institution

Branch

BSB number

Account number

## Acknowledgement by applicants

### Note:

- All applicants must read the following and sign the declaration.

### Privacy consent

References to 'we', 'us' or 'our' in this clause mean Esanda Finance Corporation Limited, ANZ, and their related bodies corporate.

### Collection, use and disclosure of personal information and your consent to disclosure.

We are collecting your personal information to enable us to provide the products applied for. Without this information we may not be able to do this. We may disclose your personal information (including information about your credit worthiness, history, standing or capacity) to:

- > Any service provider we engage to carry out or assist our functions and activities
- > Credit reporting agencies
- > Your referee
- > Other persons we are authorised or required by law to disclose information to.

You may request access to your information by calling 13 13 14. Access will be granted in accordance with the Privacy Act for a reasonable fee. If any of your information is inaccurate, you may request that it be corrected.

### Promotion of other products or services until you tell ANZ otherwise:

- > We may use your personal information to help ANZ promote its products and services or those of the group and alliance partners;
- > We may also disclose your personal information to the group or its alliance partners in connection with that purpose:
  - to enable them to decide if they want ANZ or Esanda to tell you about a product or service
  - when they have agreed to only use the information for this purpose and where they have agreed to keep the information confidential and return it to ANZ (or destroy it) as soon as it has been used for this purpose.

Where you do not want ANZ to tell you about its products or services or those of the group, you may withdraw your consent by calling 13 13 14.

### Where you supply ANZ with information about someone else

If you give us information about someone else, please show them a copy of this clause so that they may understand the manner in which their information may be used or shared by us.

### Personal information

Your agreement to the use and disclosure of your personal information applies to any personal information collected by us in the course of your relationship with us.

## Declaration

### Declaration signature

I have read and understood this application, the Esanda Term Deposit Terms and Conditions and declaration. I acknowledge that all information provided in or accompanying this application is true and correct.

### Applicant 1

Applicant's name

X

Signature

Date

### Applicant 2 (if applicable)

Applicant's name

X

Signature

Date

Thank you for applying for an Esanda Term Deposit.

If you have any questions, please don't hesitate to contact the Esanda Term Deposit Customer Service team by calling 1800 040 729 between 8am and 8pm, (AEST), Monday to Friday.