

Registering Change of Name or Variation of Signature - Joint Account

Step 1: Both account holders must sign the Account Authority form with the new signatures to be recorded.

Step 2: The account holder requiring the change of name/signature must present the Account Authority and the Customer Profile form at the enquiry desk of any ANZ Branch along with the following :

- 2 forms of Identification, one of them being a photo ID. The other form of ID must contain your signature.
- If a change of name is required, either the original Deed Poll or Marriage certificate is required. To find out if any other document is valid to support a name change, please call 1300 556 084.

If you have more than one account that these changes should apply to, please complete an account authority for each account.

ANZ Staff will carry out the instructions on the form and forward the forms for action.

ECU Links - Registering Change of Name or Variation of Signature
Joint Account – Customer Profile form



ECU Links Account

**CHANGE OF NAME/VARIATION OF SIGNATURE ON ACCOUNT
CUSTOMER PROFILE DETAILS**

ALL INFORMATION IN THIS FORM IS MANDATORY

Old Name

TITLE <i>(Select one)</i>	SURNAME <i>(Surname and First name as they appear in identification documents)</i>	FIRST NAME	MIDDLE NAME
Mr/Ms/Miss/Mrs/Dr	<input type="text"/>	<input type="text"/>	<input type="text"/>

New Name (if change or name required)

TITLE <i>(Select one)</i>	SURNAME <i>(Surname and First name as they appear in identification documents)</i>	FIRST NAME	MIDDLE NAME
Mr/Ms/Miss/Mrs/Dr	<input type="text"/>	<input type="text"/>	<input type="text"/>

Account Number(s)

RESIDENTIAL ADDRESS

ADDRESS

ADDRESS

SUBURB

STATE

POSTCODE

Daytime Contact Number

Please sign in the space provided in the presence of ANZ branch staff

Old Signature

New Signature **Date**

Instruction to ANZ Branch Staff Member

ECU Links customers have special arrangements in place with ANZ in relation to operating their accounts. You are unable to access this customer's details on the system.

This customer would like to change their name and/or vary signature on their existing account.

To facilitate this please do all of the following immediately:

- Please identify the customer by sighting 2 pieces of ID, one of them being a photo ID. The other form of ID must contain the customer's signature.
- Verify signature above with the signature on ID provided.
- If a name change is required, sight valid name change documents as required for ANZ accounts. **Attach a copy of these documents to this form.**
- Check that the Account Authority has been properly completed.
- If any of the above instructions cannot be fulfilled, please advise customer what documents must be presented for you to complete this process.
- Stamp this form and forward it with the Account Authority and copies of any name change documentation, if applicable, through Internal Mail to the following address:
ANZ Banking Partnerships Fulfilment team
1st floor, 118 Franklin Street, Adelaide SA 5000

If you need more information, please call 02-9227 1892. Thank you for your assistance.

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**Joint Account Authority
ECU Links Account**

Surname

X

First name

X

Middle name

X

Surname

X

First name

X

Middle name

X

ANZ TPC use only

Account Number

BSB

Authority for operations

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

We, the undersigned, notify you that we have authorised either Applicant 1 or Applicant 2 to:

- Sign, draw, make, discount, accept or endorse cheques, bills of exchange, drafts, promissory notes, withdrawals and other instruments.
- Overdraw or increase the overdraft on the account.
- Operate and enter into agreements to operate on the account in any way permitted by ANZ including transactions by electronic, mechanical and other means.
- Authorise direct debits.
- Place money on any form of interest-bearing deposit and receive payments and interest and deal with certificates of deposit.
- Receive and give receipts for boxes, packets, documents or property held by ANZ for any reason.
- Generally act fully and effectively in all dealings, matters and transactions with ANZ.

We further notify you that we have authorised each signatory separately to endorse all cheques, payment orders, bills of exchange, drafts, promissory notes and other instruments payable to all or any of us individually or collectively that may be credited to our account. We further notify you that all cheques, payment orders, bills of exchange, drafts, promissory notes and other instruments which are payable to fewer than all of us may be accepted by ANZ for credit to our account without enquiry.

We shall be jointly and severally responsible to ANZ for any liability incurred or to be incurred in respect of or arising from our abovementioned account or any of the documents, acts, matters and things herein mentioned and such liability shall be payable to ANZ on written demand.

Subject to any requirements by law, if any one or more of us dies, ANZ may hold to the order of the survivor(s) of us any credit balance in the abovementioned account and any deposits in our joint names, including interest accrued and to accrue thereon, and any property held by ANZ on our behalf, but without prejudice to any rights in law or equity ANZ may have in respect of such balances, deposits and property or to any steps or proceeding which ANZ may take if any person other than the survivor(s) make(s) a claim.

All previous authorities relating to the matters mentioned above are superseded except for any undetermined liabilities and instruments already drawn or executed there under but not yet presented and/or paid.

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If any one of us died, this authority shall bind our respective executors, administrators, legal personal representatives and all persons, claiming from or under us as to all documents, acts, matters and things done or executed under this authority before ANZ receives notices revoking the authority.

ANZ's collection, use and disclosure of personal information

ANZ is collecting your personal information to enable it to provide the product applied for. Without this information ANZ may not be able to do this. ANZ may disclose your personal information to:

- any person who introduces you to ANZ
- any service provider ANZ engages to carry out or assist its functions and activities
- credit reporting agencies
- your referee
- other persons ANZ is authorised or required by law to disclose information to (and other persons where you have consented to the disclosure).

You may request access to your information by calling 1300 556 084. Access will be granted in accordance with the Privacy Act 1988 for a reasonable fee. If any of your information is inaccurate, you may request that it be corrected.

By signing below you agree to ANZ doing the following things:

My consent to certain disclosures of personal information

ANZ may give our personal information (including information about my credit worthiness, history standing or capacity) to:

- any credit reporting agency
- any contractor or service provider ANZ engages to provide services connected with our relationship with ANZ.

We authorise these people to have access to our personal information from ANZ.

Promotion of other products or services

If this application is approved, then until we tell ANZ otherwise:

- ANZ may use our personal information to help ANZ promote its product and services or those of its related companies and alliance partners.
- ANZ may also disclose our personal information to its related companies or its alliance partners in connection with that purpose:
 - to enable them to decide if they want ANZ to tell us about a product or service
 - where 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 we do not want ANZ to tell us about its products or services or those of its related companies or alliances partners, we may withdraw our consent by calling 1300 556 084.

Personal information

Our agreement to the use and disclosure of our personal information applies to any personal information collected by ANZ in the course of our relationship with ANZ.

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Statement by account holders

Are you commonly known by a name or names other than those shown? If so please complete the statement below. I am also commonly known as:

Applicant 1

Applicant 2

X	X
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Declaration signature

We agree to be bound by the terms and conditions for this account which is opened in our names, including terms dealing with disclosure of information.

We acknowledge receipt of all booklets containing terms and conditions for this account and, if the Code of Banking Practice applies, general descriptive information.

We have read and understood this declaration. We acknowledge that all information provided in it is true and correct. We agree to the matters specified in the declaration.

Name

X

Name

X

Signature

X

Date

X

Signature

X

Date

X