

# Business TeleNet Saver

## Close account or change linked account



Bankwest, a division of Commonwealth Bank of Australia  
ABN 48 123 123 124 AFSL/Australian credit licence 234945

### **i** Important Information

- Complete this form in BLOCK CAPITALS using an ink or ballpoint pen and check that your details are correct.
- Make sure you have signed section 4 – please be sure before signing that you are a current authorised user.
- Include your most recent linked account (new account) bank statement if requesting a change of linked account.
- Send it to us at **Business TeleNet Saver GPO Box E237, Perth WA 6841**, fax it to us at **1300 772 658** or email to: **business.account.fulfilment@bankwest.com.au**.

Please tick (✓) the type of request:

- Change Linked Account\* » Please complete all sections
- Close Business TeleNet Saver » Please complete sections 1, 2 and 4

### Section 1 – Existing Business TeleNet Saver Account

BSB Account number

### Section 2 – Business details

Business name ("Account Holder" – must be the same as your Business TeleNet Saver Account)  Contact name

Trustee for / Trading as (as applicable)  Contact number

Address

State  Postcode

### Section 3 – New Linked Account details

Please specify your existing account (not a credit card) which will be your Linked Account. This will be the account you use to both deposit and withdraw funds from your Business TeleNet Saver account. Please note your initial deposit will be debited from your Linked Account when this application is processed. You cannot specify a date for this transaction to occur. A copy of your Linked Account statement is required for verification.

Account name (this must be the same as your Business TeleNet Saver Account)

Name of Branch or Financial Institution where the account is held

BSB Account number (your BSB and account number can be found on your statement)

\* Please provide a recent copy of your bank statement no more than 6 months old showing the first page of transactions.

### Section 4 – Linked Account Direct Debit Request declaration / Authority to close account

I/We have read the Direct Debit Request Service Agreement in the Product Disclosure Statement and agree to its terms.  
I/We authorise and request Bankwest (User ID No.473, 954 or 138471), until further notice in writing, to arrange for my/our Linked Account to be debited through the Bulk Electronic Clearing System with the amounts set out above, any further amounts I/we instruct BankWest to debit from time to time and any amount BankWest is authorised to debit under the terms of Business TeleNet Saver.

Full name	Title (i.e. Director / Secretary)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full name	Title (i.e. Director / Secretary)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full name	Title (i.e. Director / Secretary)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Full name	Title (i.e. Director / Secretary)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>