

Change of Details Notification

Complete this form to change your contact details with BankSA Margin Lending. It is important to have the most up to date details in the event we need to contact you regarding your account, which we will do either via phone, post, SMS or email.

Borrower(s) Client Reference Nu	mber		
Name of borrower 1			Date of Birth
(or company/trust name)			(for non company or trust borrowers)
			/ /
Name of borrower 2			Date of Birth
			/_/
Section 2 Your Details			
Please complete only those detail	ils that have changed.		
Residential address (PO Box not ac	cepted)		
Suburb	State	Postcode	Country
Sy instructing us to change your r	noetal addrose, you authoris		L stal address on your facility, Holder
			d Managed Fund Holdings and other
nvestments, wherever applicable.	oo, oach management		a managoa r ana riolanigo ana outo.
Mailing Address (Please write '	As Above' if same as Res	sidential address)	
Suburb	State	Postcode	Country
Home phone number	Work phone nur	mber	Fax number
	Work phone nur	mber	
Home phone number	Work phone nur	mber	Fax number Mobile phone number
	Work phone nur	mber	
Email address	Work phone nur	mber	
Email address Section 3 Authority		mber	
Email address Section 3 Authority Please accept this as an authority		mber Second Borrowe	Mobile phone number
Section 3 Authority Please accept this as an authoritist Borrower or Trustee			Mobile phone number
Section 3 Authority Please accept this as an authoriticate Borrower or Trustee		Second Borrowe	Mobile phone number
Section 3 Authority Please accept this as an authoritist Borrower or Trustee Print full name		Second Borrowe Print full name	Mobile phone number
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Section 3 Authority Please accept this as an authorit First Borrower or Trustee Print full name Signature X Date Company Borrower or Company all cases, either two directors,	by to update my details. In the second of the second one second o	Second Borrowe Print full name Signature X Date / cretary or the sole direct	Mobile phone number er or Trustee / tor/secretary must sign. Executed in
Section 3 Authority Please accept this as an authoriterst Borrower or Trustee Print full name Signature Company Borrower or Companal cases, either two directors, accordance with S127 of the Company Director signature	by to update my details. In the second of the second one second o	Second Borrowe Print full name Signature X Date / cretary or the sole direct	Mobile phone number er or Trustee / tor/secretary must sign. Executed in

Please send the completed form to: BankSA Margin Lending Reply Paid 1467 Royal Exchange NSW 1224 or fax to 1300 179 540 (or +61 2 9995 8292 if overseas)