

Third Party Access/ Authority to Act

Please complete all applicable sections of this form. Tick boxes where applicable, otherwise use CAPITAL LETTERS and leave a space between words.

Do you wish to add, change or remove a third party?

Add a new Authority

Change an existing Authority

Remove an existing Authority

Account Number

Please show the account number which you authorise the third party to access or which your third party can currently access.

Note: All accounts listed must have the same account holders.

ACCOUNT 1 No.

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ACCOUNT 2 No.

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Account Holder Details

Please include all account holders and guarantors.

Surname

Given Name(s)

Surname

Given Name(s)

Surname

Given Name(s)

Surname

Given Name(s)

Surname

Given Name(s)

Details of new third party

Surname

Given Name(s)

Address

State

Postcode

Home Phone No. ()

Work No. ()

Mobile No.

Date of Birth / /

Email

Level of access authorised to third party

Please select the level of access you would like to authorise to the third party(ies) above

1. Enquiry access only - Identification Verification form required.
Third party can request a statement, enquire about balances, payments, credit limits, rental rates and transactions.

2. Full access - Identification Verification form required.
Third party can deposit, transfer funds, arrange or change payments, notify of bankruptcy, court order or death of a customer, in addition to enquiry access as above.

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Signatures

I/We request Origin Mortgage Management Services to add, change or remove, as specified, the person ("third party") whose details are noted above to operate the account. By signing this Third Party Access form, I/we agree that the third party is my/our agent for the purpose of accessing the account noted and that I/we are responsible for the actions of the third party, for example, I/we are liable for any fees and charges which the third party incurs and which will be debited to the account.

I/We further agree that the operating authority for the accounts noted above are "any to sign". I/We will notify Origin Mortgage Management Services in writing to cancel this authority and this authority remains in force until then. I/We warrant that the information in the Third Party Access form is accurate and complete.

Signature of Account Holder 1 _____ Date / /

Signature of Account Holder 2 _____ Date / /

Signature of Account Holder 3 _____ Date / /

Signature of Account Holder 4 _____ Date / /

Signature of Third Party _____ Date / /