

Switch of Financial Institution & Account Details (for recurring payments only)



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CONFIDENTIAL COMMUNICATION

This is confidential and intended only for the use of the addressee. If you have received this communication in error, please notify the institution from which you have received it to arrange disposal. Unauthorised use of the information in this message may result in legal proceedings against the user.

To (name of user) _____ DE user ID _____

I/We have changed financial institutions and as a result my/our account details have changed. With immediate effect, please use the new account details provided below for my/our direct debits/credits.

Note: debit/credit users are required to verify (by signature comparison or other means) that this form has been properly authorised by the member before making any changes to the member's direct debit/credit arrangements. Debit/Credit users must contact the member if there is any doubt as to the member's authorisation.

MY/OUR DIRECT DEBITS/CREDITS

My/Our full account name _____

Lodgement reference	Last payment	Amount	Debit/Credit
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ACCOUNT DETAILS

My/Our old account details:

BSB _____ Account number _____

My/Our new account details:

BSB _____ Account number _____

Name of financial institution _____

AUTHORITY

I/We confirm that I/we am/are authorised to operate the account represented by the BSB and account number described immediately above (my/our new account details) and:

- for direct debits, I/we authorise you to debit my/our new account details, in accordance with the terms of my/our existing direct debit request/s.
- for direct credits, I/we authorise you to make further payments due to me/us by crediting my/our new account details.

Primary signature

Name _____

Date _____

Telephone number _____

Secondary signature

Name _____

Date _____

Telephone number _____

OFFICE USE ONLY

To user institution (FI name) _____ Date _____