External Funds Transfer (pay anyone) request form

Complete and return this form (along with evidence of payout account) to support@heartlandbank.com.au. Requests will be completed within one to two business days. If you require assistance in completing this form, or if your request is urgent, contact us on **1300 889 338**.

Section 1: Account holder details

Account number	
Primary account holder	Secondary account holder
Surname	Surname
Given name(s)	Given name(s)
Date of birth D D I M M I Y Y Y	Date of birth D D I M I Y Y Y

Section 2: External funds transfer to

Full name	
BSB -	
Account number	Payment Date D I M I Y Y Y
Reference	Amount \$

Section 3: Declaration

Please read and consider the General Terms and Fees and Charges Schedule as applicable. Copies of these documents are available on our website heartlandbank.com.au or by contacting our office on **1300 889 338**.

You agree and/or acknowledge:

- 1. you've read and considered the Heartland Bank Australia Limited (Heartland Bank, we, us, our) General Terms and Fees and Charges Schedule, as applicable and agree to accept them by signing this application;
- 2. that there are fees associated with us processing payment requests on your behalf, and that these fees are disclosed in our Fees and Charges Schedule; and
- 3. account names aren't used for verifying the payment beneficiary. By providing an incorrect BSB and/or account number, the payment may go to the wrong account, and that we may not be able to recover your funds.

Signature	Signature
Date D D I M M I Y Y Y Y	Date D I M I Y Y Y Y

Heartland Bank Australia Limited ABN 54 087 651 750 (Australian Financial Services Licence /Australian Credit Licence 245606)