

# Third party authorisation

PERSONAL ACCOUNT    TRUST    COMPANY

## A. Personal Accounts

### Account holder details

Name

Residential Address

Home phone

Postcode

Mobile phone

Postal address (IF DIFFERS FROM ABOVE ADDRESS)

Postcode

### Joint Account holder details

Name

Residential Address

Home phone

Postcode

Mobile phone

Postal address (IF DIFFERS FROM ABOVE ADDRESS)

Postcode

## B. Trust details

Title of Trust

Address

Contact phone

Postcode

Contact fax

Postal address (IF DIFFERS FROM ABOVE ADDRESS)

Postcode

## C. Business details

Title of Business

Address of Business

Contact phone

Postcode

Contact fax

Postal address (IF DIFFERS FROM ABOVE ADDRESS)

Postcode

I/we authorise

to be provided 'view only' access to the account number(s) listed below:

(IF THERE ARE MORE NOMINATED ACCOUNTS, PLEASE PROVIDE AND SIGN A COMPLETE SEPARATE LISTING)

Duplicate Statement Request\* (TICK)

1 5 3 9

1 5 3 9

1 5 3 9

1 5 3 9

1 5 3 9

### Customer Indemnity

I/we agree to indemnify TSB Bank against all losses, costs or damage suffered by the Bank, their customers or a third party, or for any actions or claims brought against the Bank by customers or third parties which result either from the misuse of this Third Party authority, or my/our failure to take all reasonable steps to prevent unauthorised use of this authority.

Authorised signature(s) of account holder

Date

Authorised signature(s) of account holder

Date

Authorised signature(s) of account holder

Date

### For Trusts

I/we confirm that I am/we are validly appointed trustees of the Trust  (TICK)

\* A duplicate statement fee of \$4 applies.