

Application by an Auswide Bank Investor for Immediate Access to Regular Income Received by Cheque for wages, etc from a single source. More than one source may be considered by Bank Services.

Deposit to Account No. \_\_\_\_\_ A/c Type \_\_\_\_\_ Phone Number \_\_\_\_\_

Account Name \_\_\_\_\_

Postal Address \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Employer \_\_\_\_\_

Employed by above for how long? \_\_\_\_\_

**Details of Cheque** Cheque Drawn By \_\_\_\_\_

Bank Drawn on \_\_\_\_\_ Branch \_\_\_\_\_

Amount of Cheque \$ \_\_\_\_\_ or Range of Amounts From \$ \_\_\_\_\_ To \$ \_\_\_\_\_

(If any cheque drawn by the above exceeds the amount granted immediate access, then the excess will be subject to normal clearance)

How often will Cheque be deposited to this account? (Weekly, Fortnightly, Monthly etc) \_\_\_\_\_

**Note: Maximum Clearance Amount per Cheque-\$1500 per week/\$3000 per fortnight/\$5000 per month**

**Details of Drawer of Cheque** Type of Business \_\_\_\_\_ How long in Business \_\_\_\_\_

Name of Directors/Owners/Partners \_\_\_\_\_

Is this a wages cheque? YES/NO If not, what is the payment for? \_\_\_\_\_

I acknowledge that any cheque deposited to the above account, which is not subject to immediate access, cannot be drawn on for "Cash Withdrawals", "Personal Cheque Payments" or transfers to another account until the full clearance period has expired. I further acknowledge that "Immediate Access" means that I may use the funds in the cheque/s described above, pending clearance of the cheque/s by the paying bank, and if this cheque/these cheques is/are dishonoured by the paying bank, than that cheque/s will be debited to the account to which it/they were deposited.

**Clearance Periods**

Local, Intrastate Cheques } 3 to 4 Business  
 & Interstate Cheques } Days  
 Overseas Cheques – 21 Business Days

Signature of Account Holder \_\_\_\_\_

Date \_\_\_\_\_

**Branch/Agency Use Only** In this Application \*In addition to \*Replacing Existing Immediate Access Cheques OR \*An Initial

Application Notes \_\_\_\_\_

Branch/Agency No \_\_\_\_\_ Op No \_\_\_\_\_ Operator Signature \_\_\_\_\_

\*Circle as applicable (if replacing, please indicate what is to be deleted)

**Banking Services Use Only** Date received \_\_\_\_\_ Approving Officer \_\_\_\_\_

Notes \_\_\_\_\_

Letter Sent \_\_\_\_\_ "00" Message Loaded \_\_\_\_\_ Follow Up \_\_\_\_\_