

# **Bank Guarantee Demand Claim Form (Beneficiary use only)**

### Things to note.

- All fields are mandatory.
- A claim can only be made before the Bank Guarantee expires or is cancelled.
- An original of this completed and signed form must be provided to a branch, together with the supporting documents listed below. Scanned copies will not be accepted.

#### Who can make a Demand?

- The beneficiary(ies) listed on the original Bank Guarantee; or
- A third-party representative on behalf of the beneficiary(ies) listed on the original bank guarantee (i.e. Solicitor, Shopping Centre Agent).

#### What supporting documents must be provided along with this form?

- The original Bank Guarantee; and
- The authority delegation document if this form is being signed by a third-party representative; and/or
- Meeting minutes or resolutions which evidence the signatory's authority to make the claim if this form is being signed on behalf of a not-for-profit organisation, club, society or incorporated association.

Section 1 - Bank Guarantee details	
Reference / Liability number (You can find this on your Bank Guarantee)	Amount \$
Issue date Expiry date (if applicable)  / / /	_Ψ
Customer name	
Beneficiary name	
Beneficiary ABN/ACN/ARBN	Beneficiary contact number
Beneficiary address	

Section 2 - Claim instructions	
I/We demand payment for: (select one option)	Full amount; OR Partial amount:
Specify the amount	\$
If Partial amount	CANCEL Bank Guarantee. No further claim(s) will be made.
	OR  RETAIN Bank Guarantee. Further claim(s) can be made up to the remaining amount of the Bank Guarantee.  Remaining amount after the partial claim is paid: \$
Section 3 - Bank cheque deta	ils
Payable to: (Beneficiary as stated c	on the Bank Guarantee)
Branch location for cheque pick-up:	
Name and contact number of person collecting: (Photo ID is needed upon collection)	
Note: The original Bank Guarantee must be returned to us in exchange for a bank cheque	

## **Section 4 - Privacy Statement**

All personal information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <a href="westpac.com.au/privacy/privacy-statement">westpac.com.au/privacy/privacy-statement</a> or by calling us on 132 032. Our Privacy Statement also provides information about how you can access and correct your personal information and make a complaint. You do not have to provide us with any personal information, but, if you don't, we may not be able to process your application or request.

## Section 5 - Authorisation and acknowledgements

## How to sign this authorisation.

- If there are multiple beneficiaries listed on the Bank Guarantee, one or more can make a claim and we'll consider it to be a claim from all of the beneficiaries jointly.
- Digital signatures are not accepted on this form. All signatures must be original wet-ink only.

#### By signing this form:

- You believe the details in Sections 1 to 3 in this form to be true and correct.
- You acknowledge and agree to us confirming the authenticity of the details completed in this form and any supporting documents provided. This may include a telephone call to the beneficiary(ies).
- If you have signed this form under power of attorney or as a third party representative, you confirm you have the authority to make a claim under the Bank Guarantee on behalf of the beneficiary(ies).
- If you have signed this form as an authorised signatory of the beneficiary(ies), you confirm that you have been duly authorised by the beneficiary(ies) to make a claim under the Bank Guarantee.

Date

## Section 5 - Authorisation and acknowledgements (continued) This authority is signed for and behalf of (full name of beneficiary) Full name and official designation (e.g. Director) Full name and official designation (e.g. Director) (BLOCK letters) (BLOCK letters) Signature Signature Date Date Full name and official designation (e.g. Director) Full name and official designation (e.g. Director) (BLOCK letters) (BLOCK letters) Signature Signature Date Date Full name and official designation (e.g. Director) Full name and official designation (e.g. Director) (BLOCK letters) (BLOCK letters) Signature Signature

Date

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