



# Notice of Authority (specific account only) – ACT Government use only

**Before this form is completed, please read the section titled ‘Privacy Statement’.**

This authority is only to be completed if the Customer requires authorised persons different from its existing account(s) to operate on this specific account **or** requires a different method of operation to apply to this specific account

## Customer Name

Customer name (provide the full name of the Government organisation and ABN, if applicable).

(insert name of customer)

Being \*a Directorate/an administrative unit of the (\*delete inapplicable one)

insert Directorate's name if applicable)

## Account Name

Account name (eg (insert Customer's name) then add specific indicator eg No. 1 account/Petty Cash Account).

(‘account’)

Account number

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## Authorisation to the Bank

The person(s) whose name(s) and specimen signature(s) appear in the section Details of Persons Authorised are authorised to act on behalf of the

Customer, pursuant to section 34 of the *Financial Management Act 1996* (ACT) or section 36C of the *Public Sector Management Act 1994* (ACT):

1. To draw cheques and other instruments on the account, if permitted by you.
2. To authorise you to make periodical payments or direct debits to the account and debit the account with any charges or costs relating to such payments.
3. To instruct you to transfer the account between your branches.
4. To instruct you to close the account.
5. To make enquiries, to give instructions and generally to request and receive information in relation to the account.

## Privacy Statement (for individuals whose personal information may be collected – in this clause referred to as “you”)

All personal information and credit-related information (if applicable) we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at [westpac.com.au/privacy/privacy-statement](http://westpac.com.au/privacy/privacy-statement) or by calling us through your relationship manager or Westpac representative. 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 or credit information (if applicable) but, if you don't, we may not be able to process an application or a request for a product or service.

## Privacy Statement (continued)

Where individuals engage with us in relation to products and services for our business, corporate or institutional customers (for example, as representative, administrator, director, corporate officer, signatory, beneficiary or shareholder of one of our customers) our Privacy Statement will be relevant to those individuals where we collect and handle their personal information. For example, where we collect their personal information to verify their identity or collect their signature as a signatory on a corporate account.

## Details of Persons Authorised

The Persons Authorised, by signing this form, confirm and agree that:

- they must be fully identified by Westpac (and not by a Verifying Officer) for the purposes of this authority before acting under the authorisation and that Westpac may decide to accept or decline an authorisation for reasons associated with its obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (the AML law) without being required to give reasons; and
- they are aware that it is an offence under the AML law to knowingly provide false or misleading information or knowingly produce a false or misleading document and that penalties for that offence can include imprisonment for up to 10 years.

Given name	Middle name (if applicable)	Surname
Residential address		8 Digit Customer No. (if applicable)
Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)	Specimen signature
Office held	WBC IDV. (Bank Use)	

Please sign within the box

Given name	Middle name (if applicable)	Surname
Residential address		8 Digit Customer No. (if applicable)
Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)	Specimen signature
Office held	WBC IDV. (Bank Use)	

Please sign within the box

Given name	Middle name (if applicable)	Surname
Residential address		8 Digit Customer No (if applicable)
Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)	Specimen signature
Office held	WBC IDV. (Bank Use)	

Please sign within the box

## Details of Persons Authorised (continued)

Given name	Middle name (if applicable)	Surname
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Residential address
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Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)
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Office held	WBC IDV. (Bank Use)
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8 Digit Customer No (if applicable)
Specimen signature

Please sign within the box

Given name	Middle name (if applicable)	Surname
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Residential address
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Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)
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Office held	WBC IDV. (Bank Use)
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8 Digit Customer No (if applicable)
Specimen signature

Please sign within the box

Given name	Middle name (if applicable)	Surname
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Residential address
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Date of Birth / /	Is the signatory known by any other name(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No ► If 'YES', provide name(s)
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Office held	WBC IDV. (Bank Use)
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8 Digit Customer No (if applicable)
Specimen signature

Please sign within the box

## Authority Agreement

This authority will continue until the Bank receives a written notice in a form satisfactory to the Bank from any one of the Treasurer, responsible Minister, responsible Director-General or their respective delegate(s) that this authority has been cancelled.

This authority cancels any previous authority the Customer has given to you regarding the persons authorised to act on the account except in relation to:

- instruments dated before the date of this authority and presented for payment after you receive this authority, and
- any act done under a previous authority.

### In this authority:

- 'you' and 'your' means the Bank.
- 'instruments' means cheques, drafts, bills of exchange, promissory notes and other instruments.

### Joint/Several Authorisation

If more than one person has been authorised, they will act in the following manner (select ✓ one option)

- ☐ Any two (2) of the persons authorised to sign jointly
- ☐ Other (then insert requirement)

### Endorsement

Under the same authorisation, authority was given to any one of the persons whose name and specimen signature appears in the section Details of Persons Authorised to endorse cheques and other instruments payable to or to the order of the Customer and lodged for the credit of the account.

### Authority Execution

insert official designation of person(s) properly authorised to open the account on behalf of the Customer and to provide this authority to the Bank) confirms that all authorisations required for the opening of the account and for the Persons Authorised to act in accordance with the terms of this authority are held.

This authority is signed for and on behalf of the Customer:

(insert Customer's name)

By (Signature)

Given name(s)

Surname

Official Designation

Date

By (Signature)

Given name(s)

Surname

Official Designation

Date

**Note:** It is an offence under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* to give false or misleading information or documents.

### Bank Use Only

Received by

Date

Authorised by

Checked by