

Westpac Institutional Bank Notice of Authority – Government Amendment to a Government Organisation's Persons Authorised

Date

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Before this form is completed, please read the section titled 'Privacy Statement'.

Customer Name

(insert full name of Government organisation and ABN, if applicable) This should be the name of the account.

Authorisation to the Bank

Pursuant to the

(insert name of organisation's enabling legislation, delegation details or other document from where the power to delegate authority is derived)

authorisation was given to the person(s) whose name(s) and specimen signature(s) appear in the section '**Details of Persons Authorised**' to be added to or deleted from the organisation's existing Notice of Authority as amendments to persons authorised and, for those persons authorised to act on behalf of the organisation, in accordance with the terms in the organisation's existing Notice of Authority in respect to:

(delete one of the following which is not applicable and initial)

- all the organisation's accounts, **or**
 the following account(s) of the organisation (list account name(s) and numbers)

Account name

BSB

Account number

This authority will continue until the Bank receives written notice in a form satisfactory to the Bank of its cancellation in accordance with the terms of the organisation's existing Notice of Authority.

In this authority:

- account includes a term or other deposit
- 'organisation' refers to the Government department, Agency, Statutory Authority, Commission or other Government instrumentality named above as the Customer.

Personal Information

In order to process this form for a product or service for the organisation of which you are a representative or signatory, or to provide or manage the provision of that product or service, we may collect personal information about you from you or that organisation. We may also use your personal information to comply with legislative or regulatory requirements in any jurisdiction, prevent fraud, crime or other activity that may cause harm in relation to our products or services and help us run our business.

If you do not provide all the information we request, we may need to reject this form or we may no longer be able to provide that product or service.

We may disclose your personal information to other members of the Westpac Group, anyone we engage to do something on our behalf, and other parties that assist us with our business.

We may disclose your personal information to an entity which is located outside Australia. Details of the countries where the overseas recipients are likely to be located are in our privacy policy.

As a provider of financial services, we have obligations to disclose some personal information to government agencies and regulators in Australia, and in some cases offshore. We are not able to ensure that foreign government agencies or regulators will comply with Australian privacy laws, although they may have their own privacy laws. By using our products or services, you consent to these disclosures.

We are required or authorised to collect personal information from you by certain laws. Details of these laws are in our privacy policy.

Our privacy policy is available at westpac.com.au or by calling 132 032. It covers:

- how you can access the personal information we hold about you and ask for it to be corrected;
- how you may complain about a breach of the Australian Privacy Principles or a registered privacy code and how we will deal with your complaint; and
- how we collect, hold, use and disclose your personal information in more detail.

We will update our privacy policy from time to time.

Other acknowledgements and consents

We may confirm the details of the information provided in this form.

Where you have provided information about another individual, you must make them aware of that fact and the contents of the Privacy Statement.

Definitions in this Privacy Statement

"We", "our", "us", means Westpac Banking Corporation ABN 33 007 457 141. "Westpac Group" means Westpac Banking Corporation and its related bodies corporate, from time to time.

Details of Persons Authorised

Provide the following details of amendments to persons authorised to act under the authorisation:

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

- If more signatures are required, complete 'Annexure A' to Westpac Institutional Bank Notice of Authority – Government Amendment to a Government Organisation's Persons Authorised' form
- Attach 'Annexure A' to Westpac Institutional Bank Notice of Authority – Government Amendment to a Government Organisation's Persons Authorised' to this form once it has been completed with details of all amendment persons authorised

Is 'Annexure A' required? Yes No

Authority Execution

The
(insert official designation of person(s) within the organisation properly authorised to delegate authority and provide this authority to the Bank)
confirms that all authorisations required for the amendment(s) to persons authorised to the organisation's existing Notice of Authority as amendments to persons authorised to act in accordance with the organisation's existing Notice of Authority are held by the organisation.

This authority is signed for and on behalf of:

Name of organisation

By (Signature)

Given name

Surname

Official Designation (Authorised representative or delegate)

By (Signature)

Given name

Surname

Official Designation (Authorised representative or delegate)

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

Certificate of Identification of Persons Authorised

I certify that I am satisfied that all the person(s) authorised in this authority is/are authorised by (insert organisation name)

to be a signatory/signatories in respect of: (delete one of the following which is not applicable and initial)

- all the organisation's accounts, **or**
- the specific account(s) of the organisation identified on page 1 of this authority.

Signature of Verifying Officer

Given name

Surname

8 Digit Customer No.

WBC IDV. (Bank Use)

Please note: Only complete this certificate if the organisation has previously nominated in writing a verifying officer to the Bank and that verifying officer has already been identified to Westpac Customer Identification Standards or is an existing customer of, the Bank. If the organisation does not have an existing nominated and identified verifying officer and would like to nominate one, please contact your Banking Representative for a 'Verifying Officer Nomination Form'.

Bank Use Only

Received by

Date

Authorised by

Date