

Authorised Third Party Form for MSC

CUSTOMER DETAILS Please provide all given names & surnames.**Customer 1**

Full Name: _____

Date of Birth: _____

Customer 2 (if applicable)

Full Name: _____

Date of Birth _____

LOAN DETAILS

Account Number/s

BROKER DETAILS

Full Name: _____

Broker ID: _____

Company Name: _____

Email: _____

Address: _____

Contact Number: _____

AUTHORITY

I/We authorise the broker named above to be my/our agent, to do any of the following:

- To obtain information about your loan account and loan disbursements.
- To enquire about the status of any progress payment activity.
- To arrange a direct debit request, substitution of security, product switch, partial release of security, complete discharge of security or loan increase and to enquire about the status of any of these.
- St. George Bank will communicate with my/our appointed representative via phone, letter, email or other forms of communication as agreed and which may be required and;
You can revoke authority at any time by contacting St. George Bank on 13 33 30.

SIGNATURES

Signed: Customer 1 _____

Date: _____

Signed: Customer 2 (if applicable) _____

Date: _____

