

## **Portfolio Facility Closure Request**

Sub-account number/s:	
<b>Note:</b> If borrower(s) require the release of the security documer and forwarded to Loan Servicing. (Only complete a Repa	
Please print name/s, tick appropriate boxes and sign below.	
Borrower 1 surname	Borrower 1 given name
Borrower 2 surname	Borrower 2 given name
Home telephone number	Business telephone number
☐ I/We request that the Portfolio loan facility be closed.	
$oxedsymbol{oxed}$ I/We request that sub-account no. be converted to a Comple	te Freedom transaction account.
As part of requesting the account to be converted to a Compare seeking this account with the following features:	olete Freedom transaction account, I/we acknowledge that I/we
<ul> <li>A transaction account to deposit and withdraw funds throu via a debit card</li> </ul>	ugh a variety of banking channels and access to funds including
No Monthly account keeping fee applies. Other fees and ch	narges may apply

card issued.Any information provided to me is factual information only.

Before making a decision about any of our products or services, please read all the terms and conditions, found at, <a href="style="color: blue;">stgeorge.com.au/content/dam/stg/downloads/personal/bank-accounts/SavInvesTransAccounts\_Terms.pdf</a> and consider whether the product or service is right for you. Fees and charges apply and may change.

**Note:** Transactions or cheques written from any Portfolio sub-account and presented for payment after receipt of this request may be dishonoured.

• I/We, named as cardholder/s, consent to the issue of a St.George Visa debit card in my/our name/s, if not already held and linked to the account, and have read and acknowledged that the relevant Terms and Conditions will govern the use of the

## **Privacy Statement**

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <a href="style="sty

Borrower 1 signature	Date
X	
Borrower 2 signature	Date
X	
Office use only - branch procedures	
Complete below by ticking all relevant boxes.	
Confirm all parties to the account have signed the form and verify all signatures.	
If applicable, obtain chequebook, and destroy. Record on LIS 600 Diary "chequebook destroyed".	
Obtain payout figure from Lending Service Centre on 1800 245 200, option 3.	
Process closeout via Spider Fast Path 24, selecting the reason for account closure.	
Forward Closure Request Form to Loan Servicing.	
N .	

## Note:

- 1. If more than 2 borrowers, please complete additional form/s.
- 2. Reduction of the balance to zero is not closing the account.
- 3. If the customer confirms that they do not wish to proceed with a Complete Freedom account, a personal advice conversation to discuss the customer's need and objectives should be completed.