

ACCELERATOR CASH ACCOUNT SECURITY LODGEMENT FORM

CommSec Adviser Services Locked Bag 34 Australia Square NSW 1214

Phone: 1800 252 351 Web: www.CommSecAdviserServices.com.au

Form ID: 2036

Where to send this form?

Please provide your completed and signed form with any relevant supporting documents to your adviser. Adviser use only: Use this Form ID to securely submit the documents via eSubmit. To use eSubmit, log into the CommSec Adviser Services website and go to: Administration > eSubmit

IMPORTANT INFORMATION

Use this form to offer your Commonwealth Bank Accelerator Cash Account (ACA) as security for your CommSec Adviser services Investment Loan. This form also provides the authority to direct debit and direct credit the Accelerator Cash Account using the Bulk Electronic Clearing System (BECS).

The ACA offered must be in the same name as the Investment Loan. This form is to be completed by the Borrower(s)/Account Holder(s).		
LOAN DETAILS		
LOAN NUMBER	LOAN ACCOUNT NAME	
ACCELERATOR CASH ACC	OUNT (ACA) DETAILS	
ACCOUNT NAME		
BSB FUNDS TO BE PLACED ON HO	ACCOUNT NUMBER LD AS SECURITY (OPTIONAL)	
\$		
Note: You will be unable to with immediately leave this section by		eld as security. If you do not wish to place a hold on funds
INVESTMENT LOAN DEBIT	ING NOMINATIONS (OPTION	NAL)
If you do not tick this box y Monthly Contributions Principal Reductions	our interest will continue to be o	charged to your existing bank account or capitalised to your loan.
ACKNOWLEDGEMENTS AN	ID SIGNATURES	
I/We confirm that I/we are offe Investment Loan referred to ab		Account as security for the CommSec Adviser Services
I/We authorise and request Confrom my/our Accelerator Cash	mmonwealth Bank of Australia (APCA User ID No. 019-108) to arrange for funds to be debited ommSec Adviser Services Investment Loan Terms and Conditions Account.
	n force in accordance with the te mSec Adviser Services Investme	erms described in the Direct Debit/Direct Credit Request Service ent Loan Terms and Conditions.
NAME OF ACCOUNT HOLDER	1 / DIRECTOR 1	NAME OF ACCOUNT HOLDER 2 / DIRECTOR 2
PRINT FULL NAME		PRINT FULL NAME
SIGNATURE		SIGNATURE
x		×
DATE		DATE
If the bank account is in joint no	ames both account holders must	rsian