



Adviser Authority to Operate Form

Form ID: 3003

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**



Use this form if you wish to authorise your Adviser to obtain information and/or conduct transactions on your account/s.

By completing this form you are providing your adviser with the authority to conduct transactions on this account on your behalf. This means your adviser will be permitted to make payments and transfer funds from this account.

Only complete this form if you wish to provide your adviser with the authority to conduct transactions on this account.

If you only wish to grant your adviser authority to view transactions and request statements then you do not need to complete this form.

To remove your adviser's authority to conduct transactions on this account and only allow them to view transactions and statements, or remove your adviser's access completely, please send us a signed written instruction to the address listed at the top of this form.

Section 1 – Account Authorisation

I/We authorise my/our Adviser (Authorised Adviser) as set out below to act on my/our behalf in connection with the below nominated account/s, to the extent of their authority set out below, to send instructions to the Commonwealth Bank of Australia (Bank).

Nominated Account Number 1:

Nominated Account Number 2:

Adviser Authorities

- (a) I/We authorise the Bank to act on instructions received from my/our Authorised Adviser/s (including their employees, agents and contractors) to:
 - request general account (including balance and individual transactions) and personal information related to the account/s nominated on this form, order cheque books, deposit books and/or KeyCards which will be sent to the address I/we nominate.
- (b) I/We authorise the Bank to act on instructions received from my/our Authorised Adviser/s to:
 - transfer funds from my/our account/s and set up periodical payments to accounts in exactly the same name of my/our account which the funds are being transferred from within the Bank.
 - place money on term deposit with the Bank in my/our name/s for any term and to withdraw on maturity, or by arrangement with the Bank prior to maturity, any such moneys held on term deposit, give valid discharges for interest paid and principle repaid and to otherwise exercise all the rights as permitted in this authority.
- (c) I/We also authorise the Bank to act on signed instructions received from my/our Authorised Adviser/s to:
 - transfer funds and set up periodical payments from my/our account/s nominated on this form to any other account specified on the written request provided; and
- (d) I/We authorise the Bank to act on instructions from my/our Authorised Adviser/s to withdraw their fees from my/our account using online or electronic services.

Account Holder/s, please sign below:

This authority must be signed by all Account Holder/s:
I/We:

- authorise and request the Bank to accept and act upon any instructions issued by my/our Authorised Adviser (including their representative under clause (a) above) pursuant to this authority and undertake and ratify whatever my/our Authorised Adviser lawfully does or causes to be done pursuant to this authority;
- understand that the appointment of my/our Authorised Adviser remains effective until I/we revoke it by providing a notice in writing to the Bank; and
- acknowledge that any instructions given by my/our Authorised Adviser in accordance with this authority will be relied on by the Bank and that the Bank will not be liable for any loss or damage I/we, or anyone else, suffers where the Bank acts on those instructions in good faith, unless it is proved that the Bank was negligent. Where the Bank agrees to supply services to me/us as a consumer, as defined in the Australian Securities and Investments Commission Act 2001 ('the Act'), then the Bank's liability will be determined in accordance with the Act. The Act permits the Bank in some circumstances to limit its liability to resupplying services to me/us.

Section 1 – Account Authorisation (Continued)

**Name of Account Holder 1 / Trustee 1 or Director 1
(on behalf of Company Account Holder)**

Given Name

Surname

Signature

Date

**Name of Account Holder 2 / Trustee 2 or Director 2
(on behalf of Company Account Holder)**

Given Name

Surname

Signature

Date

If there are more than 2 account holders or authorised signatories, please photocopy this page, complete and attach to the form.

Section 2 – Authorised Adviser to Complete

Authorised Adviser, please complete and sign below:

Authorised Adviser 1

Dealer Group

Full Name

Signature

Date

Authorised Adviser 2

Dealer Group

Full Name

Signature

Date