

TERM DEPOSIT APPLICATION



I/We wish to open a Term Deposit

This is a Personal Account This is a Business Account in the name of

The Account owner(s) are:

	First name(s)	Last name(s)	Member no.
Account owner 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account owner 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account owner 3	<input type="text"/>	<input type="text"/>	<input type="text"/>

Deposit details

I/We wish to deposit \$

for a term of months

I/We want my/our interest to be paid:

at maturity monthly quarterly half yearly yearly

(check interest rate schedule for available options for the term period selected) and:

let the interest build up in this Account

transfer the interest to Account

in the name of

send an interest cheque to:

Name
Address
<input type="text"/>
Reference

For redemptions I/we require:

Only 1 person to sign All people to sign

At least people to sign

OFFICIAL USE ONLY	
Account No. <input type="text"/>	TFN quoted
<input type="checkbox"/> Business account – documentation copied and attached	Owner 1 <input type="checkbox"/>
<input type="checkbox"/> EDVEST	Owner 2 <input type="checkbox"/>
<input type="checkbox"/> Wealth Manager	Owner 3 <input type="checkbox"/>
Interest Rate <input type="text"/> %	

I/We have previously advised my/our Tax File Number/ Exemption and wish to apply it to this Account.

I/We do not want to quote a Tax File Number/ Exemption.

I/We want to have Withholding Tax deducted from this Account.

I/We wish to open an Term Deposit and agree to comply with the associated terms and conditions as set out in this application form and the Operation of Accounts and Access Facilities booklet. I/We understand that SERVICE ONE Alliance Bank is not liable for any loss or damage caused to me/us by persons authorised to operate this Account.

I/We understand that in the case of an early redemption, an interest adjustment will be made on the amount withdrawn and I/we will be paid the rate of 0.025% on the amount withdrawn. (Note: when an interest payment has already been paid on the term, this interest adjustment may impact the principal).

Upon maturity, unless I/we instruct otherwise, I/we hereby give SERVICE ONE Alliance Bank consent to roll over the Term Deposit to another Term Deposit for a similar term. It is agreed, the interest rate may be lower than the rate of this term.

Refer to SERVICE ONE Alliance Bank's Schedule of Fees and Charges for fees applicable to Term Deposits.

I/We have reviewed, understand and agree to the important information relating to Term Deposits contained on the reverse of this application form.

Account owner 1

Signature

Account owner 2

Signature

Account owner 3

Signature

Date / /

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Term Deposit

IMPORTANT INFORMATION



SERVICE ONE Alliance Bank

In completing an application for a Term Deposit you are acknowledging that you have received the following information, and have read the relevant sections of the Operation of Accounts and Access Facilities - Terms and Conditions applicable to Term Deposits.

- Where you may have a need to immediately access the funds in the Term Deposit (before maturity) other SERVICE ONE Alliance Bank deposit products may be better suited to your investment needs.
- Where you request the funds invested in the Term Deposit be withdrawn, or transferred to another deposit product, prior to the expiry of the fixed term of the deposit a notice period of **31 days** applies to such requests.
- SERVICE ONE Alliance Bank reserves the right to delay any withdrawal or transfer of funds until the end of the period of the **31 days** notice. Where a delay is applied it cannot be beyond the agreed maturity date of the deposit.
- You will be requested, prior to the maturity date of the Term Deposit, to provide instructions as to what action you require SERVICE ONE Alliance Bank to take on maturity of the Term Deposit. Where your instructions are to reinvest the funds in another Term Deposit with terms that are substantially the same as the terms governing this product any future reinvestment will be at the rate current, at that time, for the amount of the deposit and term period. That rate may be lower than the rate applying to this Term Deposit.
- The completion of this form is, in part, giving your consent to the roll over of the funds into another Term Deposit of a term as near as possible to the initial term. You will receive a pre-maturity letter confirming the roll over arrangements and a post-maturity letter reminding you of the grace period and the potential consequences if you change your mind after the grace period.

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