

Print clearly in capital letters using **black or blue ink** if completing this form manually. Place a cross **X** within the appropriate box when selecting an option. If insufficient space, please attach additional pages. Do not sign this application form unless all necessary sections have been fully and accurately completed.

BORROWER DETAILS

Loan Account Name _____	Loan Account Number _____
Address _____	
Town/City _____	State _____ Postcode _____
Phone _____	
Email _____	

FINANCIAL INSTITUTION DETAILS

Please note:

- Redraw funds will not be paid to third parties. The nominated bank account must be in the same name as this loan account.
- Funds may take up to 48 hours to be available in your nominated bank account.

I/We request Cash Access (Redraw) from the above account in the amount of \$ _____

I/We request that the Cash Access (Redraw) be made on (date) _____

I/We request and authorise you to deposit the proceeds of the Cash Access (Redraw) to the account of:

Account Name _____	
BSB _____	Account Number _____
Bank/Branch _____	

SIGNATURES

Important Note: ALL borrowers on the loan must sign below

Signature _____	Signature _____
Full name _____	Full name _____
Date _____	Date _____

RETURN COMPLETED, SIGNED FORM TO:

Mail: **La Trobe Financial**
GPO Box 2289
Melbourne Victoria 3001 Australia

Email: **customerservices@latrobefinancial.com.au**

Office use only

All signatures verified to file, system updated and authority placed on file _____	Stamp/Sign/Date _____
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