



Corporate Authority to Operate Form

The Accelerator Cash Account and Term Deposit products administered by CommSec Adviser Services are provided by the Commonwealth Bank of Australia ABN 48 123 123 124 AFSL No. 234945.

i Use this form if you wish to authorise an entity (e.g. financial advisory firm or financial planning firm) to obtain information and/or conduct transactions on your account/s.

Where to send the completed form?

Once completed and signed, please return the form by email, fax or post to the details provided above.

Section 1 – Account Authorisation

Authorities

I/We authorise:

Entity Name (Authorised Representative)

and their employees, agents and contractors as the Authorised Representative will nominate in writing to you (each an “Authorised Signatory”) 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):

Account Number 1:

Account Number 2:

(a) I/We authorise the Bank to act on instructions received from an Authorised Signatory 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 an Authorised Signatory to:

- transfer funds to/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.

(c) I/We also authorise the Bank to act on signed instructions received from an Authorised Signatory 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
- 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.

(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 an Authorised Signatory pursuant to this authority and undertake and ratify whatever the Authorised Signatory lawfully does or causes to be done;

- understand that this authority remains effective until I/we revoke it by providing a notice in writing to the Bank; and
- acknowledge that any instructions given by me/us 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.

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

Name of Account Holder 3 / Trustee 3 or Director 3 (on behalf of Company Account Holder)

Given Name

Surname

Signature

Date