

# SHERL withdrawal/deposit form

Loan acc. no.:

Please complete the sections below. If you require assistance please call our Customer Service on **1300 50 50 50**.

## 1. Your Personal Details (for additional borrowers, photocopy this page and attach to this request)

### Borrower 1

### Borrower 2

Title  Mr  Mrs  Ms  Other \_\_\_\_\_  Mr  Mrs  Ms  Other \_\_\_\_\_

Surname \_\_\_\_\_

Given Names \_\_\_\_\_

Security Address \_\_\_\_\_

Telephone HOME \_\_\_\_\_ MOBILE \_\_\_\_\_

### Power of Attorney 1

### Power of Attorney 2

Title  Mr  Mrs  Ms  Other \_\_\_\_\_  Mr  Mrs  Ms  Other \_\_\_\_\_

Surname \_\_\_\_\_

Given Names \_\_\_\_\_

Telephone HOME \_\_\_\_\_ MOBILE \_\_\_\_\_

## 2. Payment details

Please tick the appropriate action:

Please withdraw \$  from my Seniors Home Equity Release Loan.

*Minimum withdrawal is \$2,000.*

*Your Cash Reserve Withdrawal amount will be credited to your nominated bank account.*

Please deposit \$  into my Seniors Home Equity Release Loan.

*Please complete the payment particulars in the section below.*

Drawer Details	Bank	Branch	Total
			\$ <input type="text"/>

## 3. Sign here

I/We authorise Over Fifty Seniors Equity Release Pty Ltd to withdrawal/credit the requested amount from/to our loan.

**Borrower 1 / Attorney** (all attorney's must sign)

**Borrower 2 / Attorney** (all attorney's must sign)

**X** SIGNATURE DD / MM / YYYY

**X** SIGNATURE DD / MM / YYYY

### OFSER Office Use Only

Available Funds: \$ \_\_\_\_\_

Date Received: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Operator Name: \_\_\_\_\_

### PNL Office Use Only

Date Actioned: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

PNL 18L/15L Issued: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Operator Name: \_\_\_\_\_