## Client Request Form – Repayments

| Your Loan                      | ID             |              |          |          |           |                       | Pleas      | e em     | ail to   | ser     | vice@l       | oans     | uppor      | t.com             | .au o     | or fax 130    | 00 737 40 |
|--------------------------------|----------------|--------------|----------|----------|-----------|-----------------------|------------|----------|----------|---------|--------------|----------|------------|-------------------|-----------|---------------|-----------|
| Borrower Det                   | tails Tit      | le           | Sur      | name     |           |                       |            |          | (        | Given   | Name(s)      | )        |            |                   |           |               |           |
| Borrower 1                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 2                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 3                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 4                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Contact Deta                   | ils            |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Please provide o               | current coi    | ntact deta   | ails, as | we m     | ay nee    | d to con              | tact yo    | u to cla | arify th | ne info | ormation     | on thi   | s reques   | t form.           |           |               |           |
| Private                        |                |              |          | Busine   | ess       |                       |            |          |          | Mob     | ile          |          |            |                   |           |               |           |
|                                |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Email                          |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Ongoing Loa                    | n Repayn       | nents        |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| I would like to c              |                |              | loan ı   | repayn   | nent as   | follows               | :          |          |          | T14/    | ice Mont     | thly     |            |                   |           |               |           |
| Weekly                         |                |              | Γ        | ☐ F      | ortnigł   | ntly                  |            |          |          | (15     | 5th and f    | inal da  | y)         |                   | М         | onthly        |           |
| Commencemen                    | nt Date        |              | _        |          |           |                       |            |          |          |         |              |          |            | _                 | _         |               |           |
|                                |                |              |          |          |           | inge curi<br>ayment 1 |            |          |          |         |              |          |            | the min<br>ayment |           |               |           |
| IMPORTANT: S                   | _              |              | -        | -        |           |                       | if your t  | facility | accou    | nt is p | orincipal    | and in   | terest. Fo | or facilit        | у ассс    | ounts durin   | g an      |
| interest only pe               | riod, the p    | ayment f     | reque    | ncy wi   | ili be m  | ionthly.              |            |          |          |         |              |          |            |                   |           |               |           |
| Once-Off Rep                   |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| I would like to n              |                |              |          |          | •         |                       |            | n the n  | omina    | ated k  | oank acc     | ount (N  | lominate   | ed Acco           | unt), f   | rom which     | I         |
| make loan repay                | -              |              | -        | _        | _         |                       | ment.      |          |          |         |              |          |            |                   |           |               |           |
| Total amount to                | be debite      | ed from y    | our No   | omina    | ted Aco   | count                 |            |          |          |         | On the o     | date*    |            |                   |           |               |           |
| Yes I would like               |                | •            |          |          |           |                       |            |          |          | Th      | is Once-     | Off rep  | avment     | is in res         | pect      |               |           |
| loan repayment in the next mon | _              | -            |          |          | ue        |                       |            |          |          |         | current l    |          | -          |                   |           |               |           |
| ^ A Once-Off Repayr            | ment will be a | applied agai | inst the | loan rep | payments  | s due on th           | ne loan ac | count wi | ithin on | e mont  | th after the | date the | once-off r | epayment          | t clears. |               |           |
| Following clears               | ance of thi    | s Once-o     | ff repa  | aymen    | t, pleas  | se reduce             | e my oı    | ngoing   | loan     | repay   | ments to     | the m    | inimum     | (Variab           | le rate   | loan only).   |           |
| BPAY and Dire                  | ct Credit      | :            |          |          |           |                       |            |          |          |         |              |          |            |                   |           | Yes           | No        |
| Please apply any               | у Врау рау     | ment as a    | an add   | ditiona  | ıl loan ı | repayme               | ent        |          |          |         |              |          |            |                   |           | $\circ$       | $\circ$   |
| Please apply any               | y Direct Sa    | lary Cred    | lits as  | an adc   | ditional  | loan rep              | oaymer     | nt       |          |         |              |          |            |                   |           | $\circ$       | $\circ$   |
| IMPORTANT: F                   | or fixed rat   | te facility  | appro    | oved at  | fter 28   | Septeml               | ber 201    | 13, B PA | y and    | Direc   | t Salary (   | Credits  | will be t  | reated a          | as add    | litional repa | ayments.  |
| Signatures                     | Signat         | ure          |          |          |           | Ful                   | II Name    | <u> </u> |          |         |              |          |            |                   |           | Date          |           |
| Borrower 1                     | <b>J</b>       |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 2                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 3                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |
| Borrower 4                     |                |              |          |          |           |                       |            |          |          |         |              |          |            |                   |           |               |           |

Loan Support Services: 1800 754 758

## Important!

- Where the repayment falls on a Non-Business day the transaction will take place on the preceding Business day.
- Amendments to all transactions must be received in writing at least two business days prior to the transaction date.
- All transactions including redraws, can only be processed via your Nominated Account