

The **Authorised Person** will need to bring **TWO** forms of identification, **one must have a photo**, when returning this form (eg. Drivers Licence, Passport, embossed and signed bank card, Community Services card).

## 1. Account Details

What is your name?



What is your member number?

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I hereby authorise the person described below ("Authorised Person") to operate my account

**Note:** This will not give the authorised person authority to close this account or to apply for, or sign for any form of credit including loans and overdrafts.

This authority will remain in effect until cancelled by myself in writing or upon notification to First Credit Union of my death.

Signature

Today's date

## 2. Authorised Person (to be completed by the new signatory)

What is your name?

Mr      Mrs      Miss      Ms     



What is your member number? (if applicable)

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What is your date of birth?

What is your address?




What are your phone numbers?




Signature

Today's date

## 3. Remove Authorised Person

I wish to remove the following person completely, of all forms of authority on my account, effective immediately.

Authorised person's name



Account Holder's signature

Today's date

Office Use Only

- ID checked & copies attached
- Signature scanned
- 00 notes completed

Processed by

Today's date

Scanned by

Date