

# Macquarie Bank Term Deposit Application – Limited Third Party Authority



Macquarie Bank Limited ABN 46 008 583 542 AFSL No. 237502 is the provider of the Macquarie Bank Term Deposit (Term Deposit) and Macquarie Cash Management Account (CMA).

**Do not use this form unless it accompanies the current Product Information Statement. This application form can be used by you to establish a term deposit on behalf of your client(s) in the same name as the selected Macquarie CMA.**

This form was updated in March 2021.

Please use black ink and mark boxes  with an X.

**Important – please ensure that both you and your client have completed the Limited third party authority form – advisers form prior to sending through this application.**

Return this form by mail to **Reply Paid 85744 Sydney NSW 2001** or email to **termdeposits@macquarie.com**.

On receipt of this signed application form, we will open your client's term deposit replicating the details on their existing Macquarie CMA.

These details include:

- account name
- account holder name(s)
- date of birth (if applicable)
- residential/business/postal address
- mailing address
- email address(es)
- phone number(s)
- nominated Financial Services Professional
- tax file number(s) or ABN (if requested)

Please ensure your client's existing cash account details are correct. Log in to **Adviser Online** or call us on **1300 739 980** to check their account details.

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## Existing Macquarie CMA

What is the existing CMA account number your client's Term Deposit is to be replicated from?

What is the account name?

*If no response is provided, the most recently opened account in the same name will be replicated.*

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## Term Deposit details

A. **! How much is the deposit amount (minimum \$5,000)? (MANDATORY)** \$

*For deposits over \$1 million rates may vary. Please call 1300 739 980 for further information.*

*Please note: all deposits must be completed by Direct Debit.*

B. **! For what term would you like to invest the funds? (MANDATORY)**

- 1 month    2 months    3 months    4 months    6 months    9 months  
 1 year    2 years    3 years    4 years    5 years

C. What would you like to do with the interest paid on the Term Deposit?

- Reinvest to the Term Deposit    Electronically credit the existing Macquarie CMA above

*If no response is provided, interest will automatically be reinvested to the Term Deposit.*

D. Please select an interest frequency

- At maturity    Monthly    Quarterly    Half-yearly    Annually

*If no response is provided, interest will be paid at maturity for terms under 1 year and annually for longer terms. Where interest payments are more frequent than at maturity or annually (for terms greater than 1 year), rates may differ.*

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## Account details

- A. Do you agree to allow MBL to apply the Tax File Number/s (TFN), ABN or exemption reason held on the existing Macquarie CMA account to the Term Deposit?

*If no response is provided, the most recently opened account in the same name will be replicated.*

- Yes, please apply the existing TFN, ABN or exemption reason to my new Term Deposit  
 No

If we do not hold a TFN/ABN or exemption reason for your existing cash account, if you opt not to have this applied to your Term Deposit, **or if no response received**, tax will be withheld from the interest paid to you at the highest marginal rate plus the Medicare levy. Collection of TFNs is authorised, and its use and disclosure are strictly regulated, by the tax laws and Privacy Act. Quoting your TFN/ABN or exemption reason is not compulsory and declining to quote your TFN/ABN or exemption reason is not an offence.

- B. **! Is this a business, company or trust account? (MANDATORY)**

- No ► **go to next question**  
 Yes, please supply the nature of the business and/or trust activity

Business activity:  Sole purpose corporate trustee  Investment  Charity

Other (please specify):

Trust activity:  Self-managed super fund  Investment  Charity

Other (please specify):

***If this is a trust account with a corporate trustee we require both the business activity and the trust activity.***

- C. Please supply the occupation of the individual applicant(s), director(s), secretary or trustee(s).

Individual 1 or Company Officer 1 name:

**! Occupation and industry (MANDATORY):**

Individual 2 or Company Officer 2 name:

**! Occupation and industry (MANDATORY):**

Individual 3 or Company Officer 3 name:

**! Occupation and industry (MANDATORY):**

Individual 4 or Company Officer 4 name:

**! Occupation and industry (MANDATORY):**

- D. **! What is the source of funds for this account? (MANDATORY)**

Superannuation contributions  Commission  Inheritance  Savings  Investment

Normal course of business  Asset sale

Other:

- E. **! What is the purpose of this account? (MANDATORY)**

Savings  Growth  Income  Retirement  Business account

Other:

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Signature of authorised person(s)

I/We acknowledge that I/we have provided my/our client(s) with the latest *Macquarie Bank Term Deposit Product Information Statement* and *Further information* booklet, and by signing the *Limited third party authority form – advisers* form my/our client acknowledged and understood they would be bound by the terms and conditions set out in the *Further information* booklet, including the terms of the Term Deposit Opening Authority and the direct debit service.

I/we acknowledge and agree that:

- this application form was completed while my client was in Australia
- if I/we do not provide Macquarie Bank Limited (MBL) with information as requested, or there is a delay in providing MBL with this information, MBL may not be able to open the account
- MBL is not liable for any loss incurred by me/us as a result of any action of MBL which either delays an account being opened or results in an application being declined, when these actions are necessary for MBL to comply with its obligations under AML/CTF Laws

- by signing this application, I/we also declare that all information (including tax residency information) that I/we have provided to Macquarie in relation to this application (whether on this form or by other means) is true and correct, and that I/we confirm that I/we will promptly provide Macquarie with details of any changes to the information provided by me/us and/or my/our client(s) from time to time. On request, I/we will also provide Macquarie with any further information it requires to comply with applicable laws and its internal policies, including AML/CTF Laws
- my client(s) can change their marketing preferences by telephoning Macquarie on 1800 806 310 or visiting [macquarie.com.au/optout-bfs](http://macquarie.com.au/optout-bfs), and
- I/we authorise and request any of the Macquarie Group companies listed in the direct debit agreement to direct debit the amount specified in section 2 from the Nominated Bank account specified in section 1 through the Bulk Electronic Clearing System.

**I acknowledge and agree that deposits in the Macquarie Bank Term Deposit cannot be withdrawn prior to the agreed maturity date without the provision of 31 days’ notice, except in cases of hardship.**

**!** You can sign this form electronically via one of our approved electronic signature providers and submit the form via email with any additional documentation required. Please visit Help Centre to view our submission requirements and a list of our approved electronic signature providers.

Signature 1

Date:  /  /  Title:

Name:

Signature 2

Date:  /  /  Title:

Name:

For more information about Macquarie Cash Solutions call us on **1300 739 980** or **+61 7 3233 8136** from overseas. You can also visit us at [macquarie.com.au](http://macquarie.com.au) or email us at [termdeposits@macquarie.com](mailto:termdeposits@macquarie.com)