

Internet/Phone Banking Application Request – Personal Accounts

Complete the form using blue or black pen and print in clear CAPITAL LETTERS

Complete this form if you have never had access to HSBC's Internet or Phone Banking Service. If you have previously had access or require assistance on how to complete this form, please call our Direct Service Centre on 1300 308 008.

Note: If a staff member instructs you to complete this form because your previous PBN expired, the existing PBN will be deleted for both Internet and Phone Banking. A new PBN with instructions to access Internet and Phone Banking will be re-issued.

If you are applying at a branch, staff can arrange access so you can log on immediately. However, if you are posting or faxing this form, you will receive a wallet sized card with your PBN and instructions on how to register in the mail within the next few days.

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Mail the completed form to: GPO Box 5302, S	YDNEY NSW 2001 <i>OR</i> Fax to: 1300 765 150					
Note: If your only account with HSBC is a Serious Sav	ver Account, you must MAIL this form. Faxes are not acceptable.					
CUSTOMER DETAILS						
CUSTOMER 1	CUSTOMER 2					
Customer number (9 digits)	Customer number (9 digits)					
Title	Title					
Mr Mrs Miss Ms Other	Mr Mrs Miss Ms Other					
First name(s)	First name(s)					
Surname	Surname					
AUTHORISATION						
	and the Internet Banking Service are subject to the terms and posit Accounts Product Disclosure Statement, and the Internet ave read and received.					
Signature Date	Signature Date					
X DD/MM/Y	Y DD/MM/YY					
Name	Name					

Office Use Only

_	Customer	1 Customer	Customer 2									
PBN?	Yes	Yes If	Yes If Yes, use existing PBN and complete Internet/Phone Banking Amendment Request form									
	No	No If	No If No, proceed to set up new PBN									
SV (Checking o	fficer name		Signature			Date	/	/			
OSD Rei	ference Us	ser 1			User 2							