

Personal and home loan redraw request

What are your personal details?

First borrower

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	Other	<input type="text"/>	Member no.	<input type="text"/>
First names	<input type="text"/>						Surname	<input type="text"/>
Street no. & name	<input type="text"/>							
Suburb	<input type="text"/>			State	<input type="text"/>		Postcode	<input type="text"/>
Postal address (if different from above)	<input type="text"/>							
Suburb	<input type="text"/>			State	<input type="text"/>		Postcode	<input type="text"/>
Home phone	<input type="text"/>			Work phone	<input type="text"/>		Mobile phone	<input type="text"/>
Email	<input type="text"/>							

Second borrower

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	Other	<input type="text"/>	Member no.	<input type="text"/>
First names	<input type="text"/>						Surname	<input type="text"/>
Street no. & name	<input type="text"/>							
Suburb	<input type="text"/>			State	<input type="text"/>		Postcode	<input type="text"/>
Postal address (if different from above)	<input type="text"/>							
Suburb	<input type="text"/>			State	<input type="text"/>		Postcode	<input type="text"/>
Home phone	<input type="text"/>			Work phone	<input type="text"/>		Mobile phone	<input type="text"/>
Email	<input type="text"/>							

How much do you need to redraw?

I/We request a redraw of \$ from loan account L to be transferred to my/our account (e.g. S1)

Please sign below in black pen only

I/We acknowledge that if the above redraw contravenes the terms of the loan contract it will not be processed. If Teachers Mutual Bank Limited is unable to process the redraw as the result of our failure to comply with those terms, I/we accept full responsibility for such failure and will not seek any recourse against Teachers Mutual Bank Limited.

First borrower

Signature	<input type="text"/>	Date	<input type="text"/>
-----------	----------------------	------	----------------------

Second borrower

Signature	<input type="text"/>	Date	<input type="text"/>
-----------	----------------------	------	----------------------

Returning this form



Teachers Mutual Bank Limited, Reply Paid 7501 Silverwater NSW 2128



(02) 9704 8246