

Transfer of Joint Deposit Account under Rights of Survivorship (Estate Administration) – Sole Account

Please complete this form and lodge at any MyState branch or return to: MyState Estate Management, GPO Box 1274, Hobart, TAS 7001.

I, (insert full name)	
Customer No.	
Request the transfer of Account Number(s)	
Held jointly with Estate of (insert full name)	
Customer No.	

Into my sole name under the Rights of Survivorship for jointly held MyState deposit accounts.

I confirm that I have previously provided the Record of Death for the deceased to MyState; or

I have attached a certified copy of the Record of Death for the deceased.

I acknowledge that once this transfer request has been lodged I will be unable to deposit cheques payable solely to the Estate into my account without evidence of entitlement having being provided to MyState (certified copy of Probate, Letters of Administration or Last Will and Testament; or evidence of next of kin where these documents are not in existence).

I confirm that I have updated my BSB and account number with any regular payee where payments were being processed using the customer number of the Estate. (For information regarding this, please contact us.)

I acknowledge that the following account types can not be transferred:

- · Accounts with overdraft limits attached
- Loan Accounts
- · Offset Accounts linked to Loan Accounts
- Term Deposit Accounts currently in term. I acknowledge that I will need to close the joint Term Deposit and apply for a new account at the current rate.

Cheque Facility

I currently have a cheque facility attached to the following account(s) and require the reissue of a cheque book into my sole name. I acknowledge that upon lodgement of this form any cheque book issued in joint names will be cancelled and any outstanding cheques not yet presented may be dishonoured, and incur dishonour fees.

Yes

— II N I.

Not applicable

Account No.

If more than one account has a cheque facility attached, list accounts separated by commas.

Acknowledgement

I confirm that I will retain the sole liability and responsibility for the continuing operation of the account held in accordance with the Terms & Conditions Deposit Accounts and Fees & Charges Deposit Accounts, copies of which are available at mystate.com.au, at any MyState branch or by calling 138 001.

Full Name	Signature		
Date			
DD MM YY			
OFFICE USE ONLY			
Customer Identified and Signature Verified			
Accepted by (name)		User No.	Date
			DD MM YY
Estate Administration			
Processed by (name)		User No.	Date
			DD MM YY
Record of death held			
Operational Support			
BSB No. 217 032 Link no. 009			