

Customer Name

Loan Account No. Customer No.

I/We acknowledge that the minimum for redraw amount is \$1.00 and that the excess repayment amount available at the date of application must be a minimum of \$1.00.

I/We acknowledge that I/We may apply to redraw excess repayments up to, but no more than, the amount that would have been the outstanding balance under the loan contract had I/we made all repayments as the loan contract requires.

I/We hereby request and authorise MyState Bank to redraw \$ (minimum amount \$1.00)
of my/our advance payments on the above mentioned loan account number and transfer to my/our MyState Bank account number

I/We understand that the current scheduled repayments will continue and I/we will ensure that all repayments are made by the due date.

REPAYMENT REDRAW FACILITY

If we agree to your application to redraw, then the amount you redraw will be debited to the unpaid daily balance of the account and the terms and conditions of the contract will apply to that redraw.

We may charge you a loan redraw fee if your application for redraw is accepted.

The borrowers right to redraw under this facility ends when the amount of credit and interest debited to the account is repaid in full.

Applicant 1

Full Name (Please print)

Signature

Date

Applicant 2

Full Name (Please print)

Signature

Date

OFFICE USE ONLY

Account Code

Checked signatories & signatures

Discussed next repayment and due date

Accepted By

Date

Request for at least \$1.00

Staff Loan (No redraw fee to apply)

Branch