



INTRODUCER ACCREDITATION FORM

Introducer Details

Company and/or Trading Name: _____

Director(s) Name: _____

Business Address: _____ Post Code: _____

Tel : () _____ Fax: () _____ Mobile: () _____

Email Address: _____

Occupation: *(eg. Broker, Estate Agent, Lawyer)* _____

Industry Associations: *(eg. MFAA, Law Society)* _____

Do you require training of any of your staff from our team on privacy loans? Yes / No

Payment of Your Brokerage

ABN# *(Please ensure this is the ABN linked to the company name listed above)*

Are you registered for GST? Yes / No

Director's Signature: _____ Date: / /

Director's Name: _____

Director's Signature: _____ Date: / /

Director's Name: _____

Bank Details *(Where money should be paid)*

BANK: _____ ACCOUNT NAME: _____

BSB: _____ ACCOUNT NUMBER: _____