

I am a Member of Credit Union SA **YES** my Membership number is: _____
 NO in addition to this form please complete a new Membership Application (FRM_ F014)

Surname Mr/Mrs Miss/Ms/other: _____ Given Names: _____

Date of Birth: _____ Contact Phone No.: _____

Email address: _____

Residential Address: _____

Postal Address (if different from above): _____

FIRST HOME SAVER INFORMATION

I declare that:

- I have read and understand the eligibility conditions for FHSA and that I am eligible to open a FHSA.
- I have never owned or jointly owned a dwelling that has been my main residence in Australia or Norfolk Island, and one of the following applies.
 - I have never held another FHSA.
 - I currently have an FHSA but I want the balance of my existing FHSA transferred to the new FHSA I am now opening. (If so, complete the transfer authority).
- My Tax File Number is _____

Under the First Home Saver Accounts Act 2008, Credit Union SA is authorised to collect your tax file number and other information about your FHSA. Although you are not obliged to provide your tax file number, we cannot open an FHSA for you without it. We can only use your tax file number for lawful purposes. We are authorised to, and will, disclose your tax file number and other information to the Commissioner of Taxation. If you later transfer the balance of your account to a super fund or to another provider, your tax file number must also be disclosed to that fund or provider.

- My Access Code is _____
Select any combination of 4 to 8 single numbers and characters. **DO NOT use dates of birth, phone numbers etc as it opens the possibility of fraud on your account.**

I have held a FHSA which was closed for one of the following reasons:

- The purchase of a dwelling that was to become my main residence did not eventuate and I am opening this new FHSA within six months of closing the previous FHSA.
- I closed the FHSA within the cooling-off period and I am now opening this new FHSA.

Signature

Date

NB: If you make a false or misleading statement, there are significant penalties and you may be prosecuted.

office use only:

Date Received _____

Processed by _____

Approved A/c No. _____

Checked by _____

Declined

PDS logged _____