

Deceased Authorisation to Close - STL

In what's always a difficult time, we've tried to make our paperwork as easy as possible for you.

This form

- Allows the executor/s or administrator/s, to give us authority to finalise a Deceased estate, close account/s and hand over funds to the claimants.
 - Must be signed by each of the executor/s or administrator/s of the estate. *
- * Each executor/s or administrator/s photo ID (such as driver's licence or passport) is required if they are not a Bendigo Bank customer.

We're here to help.

If you have any trouble completing it, just call us on 1300 014 902. We're here between 8.30am – 5pm (Australian Eastern Standard Time) weekdays, and we're always happy to help.

Section 1: Deceased customer details

Deceased's Name: _____

Date of Customer's Death: ____ / ____ / ____ Deceased Customer No. _____

Account Number	Account Type	Account balance
		\$
		\$
		\$
		\$
		\$
		\$
		\$

Section 2: Your identification (This is a Government Requirement)

To satisfy Government Regulations it is necessary for the Bank to identify you by sighting direct evidence of your identity using **one** of the following options (Select the option for how you wish to be identified)

Option 1:

- One of your existing account numbers with Bendigo Bank

Option 2:

- A certified copy of your photo ID (such as your driver's licence or passport)

Closing the accounts and distribution of funds

A. Closure.

As executor or administrator of the estate, I authorize and request closure of **all** accounts. By signing below, I authorise Bendigo bank to combine accounts and clear any debts held solely by the Deceased in relation to personal loans, credit cards, overdrawn transaction accounts and the like.

B. Distribution of funds – How do you want the payments to be made?

- By transfer into the following Bendigo Bank estate _____

Bank Cheque made payable to

- Cheque payable to: Estate of: _____

Section 4: Signatures

Executor #1

Signature: _____	Date: / / _____
Full Name (print) _____	
Address _____	
Suburb/Town: _____	State: _____ Postcode: _____

Executor #2

Signature: _____	Date: / / _____
Full Name (print) _____	
Address _____	
Suburb/Town: _____	State: _____ Postcode: _____

Executor #3

Signature: _____	Date: / / _____
Full Name (print) _____	
Address _____	
Suburb/Town: _____	State: _____ Postcode: _____

Executor #4

Signature: _____	Date: / / _____
Full Name (print) _____	
Address _____	
Suburb/Town: _____	State: _____ Postcode: _____