

INSTRUCTION FORM: GUARANTEE AND INDEMNITY

YOUR DETAILS

I am _____ an advisor to an individual seeking to set up a guarantee and indemnity
_____ an individual seeking to set up a guarantee and indemnity

Full name

Address

Phone

Email

LENDER

Lender #1

Full name/Company name

ACN (if applicable)

Address/Registered office address

Lender #2

Full name/Company name

ACN (if applicable)

Address/Registered office address

As Above

If you have additional lenders, please include all relevant details in the textbox at the end of this form.

BORROWER

Borrower #1

Full name/Company name

ACN (if applicable)

Address/Registered office address

Borrower #2

Full name/Company name

ACN (if applicable)

Address/Registered office address

As Above

If you have additional borrowers, please include all relevant details in the textbox at the end of this form.

GUARANTOR

Guarantor #1

Full name

Address

Guarantor #2

Full name

Address

If you have additional guarantors, please include all relevant details in the textbox at the end of this form.

DETAILS OF GUARANTEE

Is the guarantee limited to a maximum amount? Yes No

If "Yes", please specify:

Are there any other instructions we should know about (including additional lenders etc)?

BILLING

Your chosen payment method:

Cheque in mail

Direct deposit

Bankcard

Mastercard

Visa

Please send me an invoice, which I agree to pay within 14 days

Card number

Name of cardholder

Expiry date

Direct deposit details:

National Bank Australia (Pirie Street)
BSB: 085-005 Account: 525 554 575
Reference: "Shelfdocs [INSERT YOUR COMPANY NAME HERE]"