

Bank Switching Request Form

| Current Bank / Branch: | | | | | | | | |
|--|--|---|--|--|--|--|--|--------------------------------|
| Current Bank Customer / Account Name: | | | | | | | | |
| New Bank: | The Hongkong ar ("HSBC New Zea | | ai Banking Co | orporation | Limited | l, New Ze | aland bran | ch |
| HSBC Contact Details: | Address: P.O. Box Email: clearing@l | | ria St West, A | Auckland 1 | 142, Nev | w Zealand | d | |
| The above customer is in the at least five (5) business days account closure box below. | process of changing their from receipt of this form | r account(s) to n unless the c | o HSBC New Z ustomer has sp | ealand. The pecified a lo | account onger acco | closure prod ount closure | cess takes e date in the | |
| Current Bank account number | Close (Y/N) | AP | BP | DD | | BC NZ a | occount | |
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| Payment cancellation of | late | | | Cur | rent Ba | nk accou | unt closure | dat |
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