



Personal Indemnity Form

Branch

Applicant's Names

Applicant's ID type

Applicant's ID No.

☐ Change in Signature Indemnity

I do hereby confirm that I have changed the signature I used the time I acquired my identity document which I (have) used to open my account with you and I therefore request the bank to honour my new signature below for the following nominated accounts, going forward.

Nominated accounts

Account Number														Account Title/Account Name	

☐ Communication Indemnity

☐ Telephone (Specify if possible)

1.

2.

☐ E-mail (Specify address)

In consideration of the Bank agreeing to effect instructions from me/ us from time to time by telephone, facsimile transmission or E-mail ("The Instructions") for the operations of my/ our account(s) above with you, without requiring written confirmation bearing actual signatures in accordance with the mandate(s) for such account(s);

I/We hereby

1. Authorise the Bank to act on the Instructions which it (in its sole discretion) believes to have emanated from me/ us and it shall not be liable for acting in good faith on instructions which emanate from unauthorised individuals.
2. Confirm that the Bank shall be under no obligation or duty to verify the identity of the person or persons giving instructions purportedly in my/ our name, and any transaction made pursuant to such instructions shall be binding upon me/ us whether made with or without my/ our authority, knowledge or consent.

Undertaking:

I/We undertake to indemnify and keep the Bank at all times indemnified from and against all actions, proceedings, losses, claims, charges, demands, expenses, costs and damages whatsoever which may be duly incurred or suffered by the Bank or to which the Bank may be or become liable by reason of reliance on my/our instructions or submissions.

1st Applicant's signature : _____ Date : ____/____/____

Additional Applicant's signature : _____ Date : ____/____/____

Bank Official /
Witness

Names

Signature

Date