



# Loan Redraw Request

Police & Nurses Credit Society Limited  
ABN 69 087 651 876  
AFSL 240701  
Level 7, 130 Stirling Street  
Perth WA 6000

PO Box 8609, Perth BC,  
Western Australia 6849  
Telephone 13 25 77  
www.pncs.com.au



Name \_\_\_\_\_ Member Number \_\_\_\_\_  
 Name \_\_\_\_\_ Member Number \_\_\_\_\_  
 Loan Account Number \_\_\_\_\_

Current outstanding balance \$ \_\_\_\_\_  
 Take the in-advance amount \$ \_\_\_\_\_  
 LESS - Next repayment amount \$ \_\_\_\_\_  
 LESS - Any outward direct debits in past two days \$ \_\_\_\_\_  
 LESS - Any cheque deposit in past six days \$ \_\_\_\_\_  
 = \$ \_\_\_\_\_ Balance available for redraw

Redraw amount requested by member \$ \_\_\_\_\_  
 Amount in words \_\_\_\_\_

I/we hereby request to redraw funds in advance of the required minimum repayments as set out above in accordance with the Terms and Conditions of my/our loan contract. Please select one of the following:

Please transfer these funds into my/our Police & Nurses Credit Society account number \_\_\_\_\_

Please issue Corporate Cheque in favour of \_\_\_\_\_ post/collect.

I/we understand that this request is subject to the conditions of the redraw facility being met by me/us.

**I/we understand that these funds will be available in my/our nominated savings account within two working days.**

Signature \_\_\_\_\_  
 Name of signatory/s \_\_\_\_\_  
 Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature \_\_\_\_\_  
 Name of signatory/s \_\_\_\_\_  
 Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**All borrowers to loan must sign Redraw Form.**

## OFFICE USE ONLY

The following items have been checked (as per procedure)

Notes .....  YES  NO  
 Document location status .....  YES  NO  
 Property type .....  YES  NO  
**Redraws over \$9999 must be forwarded to Member Support for processing** .....  YES  NO

Calculating Officer Name \_\_\_\_\_ Calculating Officer Name \_\_\_\_\_  
 Calculating Operator Number \_\_\_\_\_ Calculating Operator Number \_\_\_\_\_  
 Calculating Officer Signature \_\_\_\_\_ Calculating Officer Signature \_\_\_\_\_