

Withdrawal Request

Please use BLOCK LETTERS in black or blue pen only.

Any request for an early redemption from a Fixed Term Investment will be processed at our sole discretion. If we approve your early redemption request, a 31 day Notice Period will apply before funds are released and you may incur an early redemption penalty.

If your withdrawal request is made against a Notice Account, your notice period will begin from the time this notice is received by us.

Subject to any notice period applicable to your investment, we will process your request on the same business day if received before 3:30pm.

Please return your completed form to our office:

In person:
Level 2, 212 Pirie Street
Adelaide

By mail:
GPO Box 2145
Adelaide SA 5001

By email:
info@ucinvest.com.au

By fax:
08 8236 4250

Need help or have a question?

Call: 1300 274 151

Email: info@ucinvest.com.au

Visit: ucinvest.com.au

STEP 1:

Transaction Details

Account Number _____

Account Holder _____

Amount \$ _____

OR

Close Account

If you are closing your account please let us know what prompted your decision

Transaction Date DD / MM / YYYY _____

STEP 2:

Method of Withdrawal

We offer the following two withdrawal options.

Electronic Funds Transfer (EFT)

Financial Institution _____

BSB Number _____ -

Must be 6 digits

Account Number _____ - -

Maximum of 9 digits

Account Holder _____

Must be held in the name of at least one account holder

Transfer to another account with UC Invest

Account Number _____

Account Holder _____

STEP 3:

Financial Hardship Request

If you are experiencing Financial Hardship you may apply to us for the early release of funds from your investment. If we approve your request, your payment will be processed immediately and you will not incur any redemption penalties.

Please see overleaf for more information about applying for a Financial Hardship early redemption request.

STEP 4:

Transaction Authority

I/we acknowledge and accept that this withdrawal request is governed by the conditions of my/our investments contained in the *Product Disclosure Statement*.

Authorised Signatory

Sign here

Name _____

Date DD / MM / YYYY _____

Authorised Signatory

Sign here

Name _____

Date DD / MM / YYYY _____

