

Account Name
Account Number
A: Appointment of Powerwrap Limited as Full Access Operator
I/We hereby appoint Powerwrap Limited, and its partners, officers, employees, agents and service providers, to have Full Access Operator status on my/our account. I/We authorise my/our personal information and account information (which includes customer number, BSB, account number, account name, transaction information and account balance data) to be provided electronically to Praemium Australia Pty Ltd (who are Powerwrap Limited's technology service provider) each business day to enable Powerwrap Limited to provide services to me/us.
B: Removal of Powerwrap Limited as Authorised Operator
Please cancel the authority of Powerwrap Limited to my/our account.
Please note: Cancelling Powerwrap Limited's authority means they will no longer have access to perform transactions or access information on your account.
C: Account operating authority
By signing this form you acknowledge that Powerwrap Limited has the authority to operate your account as a Full Access Operator in accordance with the terms set out in Part C of the Adelaide Cash Management Account Product Guide. Please note Powerwrap Limited will not be permitted to be issued a cheque book, cash card or access to an online banking facility in relation to your account, they will facilitate all transactions on your account via the submission of a daily electronic file or written debit request to Bendigo and Adelaide Bank Limited in response to transactions requested directly by you or your adviser and other amounts as required to operate your account including, but not limited to, the payment of fees.
D: Declaration and Acknowledgement
You should read and understand the Adelaide Cash Management Account Product Guide. In particular, your attention is drawn to the section titled 'Giving someone access to your account'.
I/We the undersigned:
 Authorise each Authorised Operator in this form to operate my/our account subject to the level of access specified for each operator in section A and B and the instructions I/we have provided in section C of this form; Understand that any such appointment of an Authorised Operator continues until I/we cancel the appointment by giving notice in writing to Bendigo and Adelaide Bank Limited; Acknowledge that where I/we have asked Bendigo and Adelaide Bank Limited to delete or modify an Authorised Operator's access that this instruction supersedes any prior instruction; and Acknowledge that a Full Access Operator is permitted to withdraw some or all of my/our funds upon notice in writing or electronically to Bendigo and Adelaide Bank Limited.
(If there are more than two applicants attach details separately)
Customer 1: Customer 2:
Full name:
Corporate title (if applicable): Corporate title (if applicable):
Signature Signature
Date DD - WWW - YYYY
(Office Use Only)
Investment number Signature verified Yes No Scan number
App. Specific to
KYC completed on behalf of Powerwrap Limited Yes KYC completed on behalf of underlying client Yes
RFS -1.2.i16 External X-Ref 352221 Yes Ext Op Org POW Yes RFS -2.1.a1 Authority Number 305023024 Yes Broker Code 352221 Yes RFS -1.1.m9 (-1.8.14) NOT TO BE LOADED Yes POW Yes Yes