

# Rate Lock Application

Complete this form to lock in a current fixed interest rate for up to 90 days. Call **1300 302 474** if you require assistance.

Please print and send your completed form to: Gateway Bank, PO BOX 3176, Sydney NSW 2001

\* Denotes Mandatory Field



## Your Details

### Applicant 1 Details\*

Title\*  Mr  Mrs  Ms  Miss  Dr  Prof

First Name\*

Middle Name

Last Name\*

Membership No.

### Applicant 1 Contact Details

Please specify at least one phone number

Country Area Number

Home

Work

Mobile

Email

Same as residential

### Applicant 1 Residential Address\*

Unit Number

Street Number

Street Name\*

Suburb/Town\*

State/Territory\*

Postcode\*

Country\*

### Applicant 1 Mailing Address

PO Box

RMB

Unit / Street No.

Street Name

Suburb/Town

State/Territory

Postcode

Country

### Applicant 2 Details\* (complete if applicable)

Title\*  Mr  Mrs  Ms  Miss  Dr  Prof

Membership No.

First Name\*

Middle Name

Last Name\*

## Your Rate Lock

Locked Amount\* \$

Locked Interest Rate (%p.a.)

Loan Term (yrs)

### Rate Lock Fee

A fee of 0.15% of the Locked Amount is payable with your signed Rate Lock Application form.

Payment can be made by  Cheque  Debit my account  Credit Card

Rate Lock Fee (0.15% x locked amount) \$

GPO Box 3176 Sydney NSW 2001

1300 302 474

@ [lending@gatewaybank.com.au](mailto:lending@gatewaybank.com.au)

[www.gatewaybank.com.au](http://www.gatewaybank.com.au)



## Your Rate Lock (continued)

### Bank Account Details<sup>1</sup>

Amount \$	<input type="text"/>	Account Name	<input type="text"/>
Bank Name	<input type="text"/>	BSB	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>
Branch Name	<input type="text"/>	Account No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

### Card Details

### Card Type

Cardholder Name	<input type="text"/>	<input type="checkbox"/> Visa Card	<input type="checkbox"/> MasterCard
Card Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Expiry Date MM/YY	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>		

I authorise Gateway Bank Ltd to debit my card with the below mentioned amount. I certify that I am over 18 years of age.

Amount \$	<input type="text"/>	Cardholder Signature	<input type="text"/>
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<sup>1</sup>For more information about Direct Debit Terms and Conditions, please refer to our website [www.gatewaybank.com.au](http://www.gatewaybank.com.au)

## Declarations & Consent

I am/We are requesting 'Rate Lock' for the Fixed Rate Loan Type, term and applicable interest rate current on the date Gateway Bank (Gateway) receives my/our signed Rate Lock Application form. I/We acknowledge that the date Gateway receives my/our signed Rate Lock Application form will be the 'Rate Lock Effective Date'.

I/We acknowledge that acceptance of this request by Gateway does not constitute approval of my/our loan application in any way. I/We further acknowledge that a Rate Lock Fee applies and is payable with my/our signed Rate Lock Application form. Should I/we fail to pay the Rate Lock Fee, the Rate Lock interest rate will no longer apply. I/We acknowledge that the Rate Lock Fee is only refundable if my/our loan is declined or withdrawn by Gateway and that any fee refund will be by Direct Credit Transfer only.

I/We acknowledge that if Gateway agrees to this request and payment of the fee is made, Gateway makes the Rate Lock available for 90 days from the Rate Lock Effective Date. If settlement does not occur within this period, the interest rate applied to the loan will revert to the prevailing advertised rate.

I/We acknowledge that the locked interest rate is to apply to my/our loan for my/our first Fixed Rate period provided loan funding occurs within 90 days from the Rate Lock Effective Date.

### Applicant 1\*

### Applicant 2\* (complete if applicable)

Signature*	<input type="text"/>	Signature*	<input type="text"/>
Print Name*	<input type="text"/>	Print Name*	<input type="text"/>
Date*	<input type="text"/>	Date*	<input type="text"/>