

# Lost Bank Guarantee Cancellation Form

#### Macquarie Bank Limited ABN 46 008 583 542 AFSL and Australian Credit Licence 237502 ("Bank").

This form must be completed by the beneficiary of a bank guarantee that has been lost, destroyed, or otherwise cannot be returned to the Bank under any of the following circumstances (please select the option that applies to you):

I have lost a bank guarantee that I no longer require

I have lost a bank guarantee and I need a replacement to be issued.

**Note:** If you select this option, subject to the due completion of this form and the Bank's verification of the identity of the signatories, a new replacement bank guarantee will be mailed to the details set out in Section 1.

I have lost a bank guarantee that I need to be changed or amended.

**Note:** If you select this option, please complete this form as required and, separately, contact the Client who can request the change or amendment directly with the Bank.

#### Instructions:

- 1. Please complete all relevant sections of this form and sign in accordance with the Beneficiary's entity type.
- 2. Return the completed form and the following supporting documents via email to **business@macquarie.com** or via registered mail to:

#### Client Administration, Macquarie Bank Limited, GPO Box 2520, Sydney NSW 2000.

For each signatory, a copy of their current photo ID which includes their signature (e.g. Australian Driver's Licence or passport)

For each authorised signatory (where applicable), proof of their authority to sign this form on behalf of the Beneficiary

Important: Please ensure that you keep a record of the tracking number of the registered mail.

For more information on bank guarantees including applications, amendments, and claims, please visit **www.macquarie.com.au/bankguarantee** 

## 1. Beneficiary Details

Beneficiary:

The complete name of the Beneficiary as it appears on the original Bank Guarantee

ABN/ACN (if applicable):

In case the Bank needs to contact or mail you in relation to this form, please provide the following details:

Primary Contact Name:

Address:

Phone Number:

Email:

## 2. Lost Bank Guarantee Details

Y Please provide the details of the bank guarantee to which this form relates ("Lost Bank Guarantee"). We suggest that you contact the Client if you are unsure of any of the details in this section.

Name of Client:

Guarantee Amount (\$):

Guarantee Number:

Issue Date:

# 3. Acknowledgment and Undertaking

By signing this form, I/we:

- acknowledge that the obligations and liability of the Bank under the Lost Bank Guarantee shall cease immediately upon verification of the identity of the signatories of this form; and
- undertake to promptly return the Lost Bank Guarantee to the Bank for cancellation if it ever comes into my/our possession.

## 🕂 This form must contain a wet ink signature(s) - digital signatures are not accepted.

Additionally, this form must be signed in accordance with one of the following (as applicable to the Beneficiary entity type):

- Two directors or a director and a company secretary
- For a sole director/company secretary, the director/company secretary
- For a partnership, any two partners
- Authorised signatory/ies as per the attached supporting documentation
- Executed by the Beneficiary

Signature 1:

Full Name:

Title/Position:

Please state if you are signing as a Director, Company Secretary or authorised signatory (in which case, please also state your title/position)

Date:

### Supporting Document Attached:

Copy of current photo ID which includes signatory's signature (e.g. Australian Driver's Licence or passport).

Proof of the authorised signatory's authority to sign on behalf of the Beneficiary (if applicable)

Signature 2:

Full Name:

Title/Position:

Please state if you are signing as a Director, Company Secretary or authorised signatory (in which case, please also state your title/position)

Date:

## Supporting Document Attached:

Copy of current photo ID which includes signatory's signature (e.g. Australian Driver's Licence or passport).

Proof of the authorised signatory's authority to sign on behalf of the Beneficiary (if applicable)

**Privacy Statement:** Where we collect personal information (including in this form), we do so in order to carry out your instructions and to comply with applicable laws. For more information about how we handle personal information, please see our Macquarie Group Privacy Policy, which is available on our website