

Consent by a Beneficiary/Executor/ Next-of-Kin

Purpose of this form

For Executor(s)/Administrator(s), beneficiaries or immediate next-of-kin to authorise the Bank to release assets from the estate to a claimant.

If you would like any support with completing this form, please call us on **1800 686 153** between 8:30am and 5:00pm, Sydney time, Monday to Friday.

What you need to know and do

- A separate form must be completed by each person giving consent to release assets from the estate.
- All copies of documents must be certified. Please note, if you have given these documents to us previously (including your identification documents), you do not have to supply them again. Simply let us know which documents you have previously provided in the Notes section at the end of this form.

Deceased's full name(s)

Section 1 – Consenter's details

I, (full name(s) of consenter)

Other names known by (if any)

Date of birth

Daytime telephone number

of (residential address, PO Box is not acceptable)

State

Postcode

I am the: Spouse (wife/husband) Parent (mother/father) Child (over 18)

Domestic Partner

Sibling (brother/sister)

Other

of the deceased and hereby request the Commonwealth Bank of Australia (CBA) to release the funds from the deceased's estate to the person or persons named on the 'Claim for Assets' form(s) (002-630) and their receipt shall constitute a full discharge for the said assets.

Signature of person providing consent

Date

Section 2 – Your Identification (this is a Government requirement)

To satisfy Government Regulations it is necessary for the Bank to identify executors and signatories of an estate by sighting direct evidence of their identity via **one** of the following 3 methods:

Option 1 ▶ Provide one of your existing CBA account numbers:

Option 2 ▶ Provide acceptable identification details to us at a CBA branch for endorsing by branch staff.

Document type	Document number	Name on document	Place of issue	Issue date	Expiry date

Verification has been performed for the customer

Full name, **and** Date of birth, **or** Residential Address

Bank Officer's name

Bank Officer's signature

Date

Option 3 ▶ Alternatively complete a '**Certified Copies Identification**' or '**Isolated Area Aboriginal and Torres Strait Islander Identification**' form.



Thank you for your time in completing this form, we will be in contact shortly.

Bank use only



Please Note: This form and any other documents received must be imaged onto the deceased customer's profile under one cover sheet. Once imaged, create a work item request, per the instructions below.

Creating a CommSee Work Request (from client chevron) Select Request > Category: Client Management > Request Type: Deceased > Assign To: SMT - DECEASED ESTATES > Template: Branch - New Deceased Notification.