

## Individual Originator – Application for Accreditation

<b>Application Date:</b>	
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<b>1. Individual Broker Details:</b>	
Name:	E-Mail:
Phone (w) and mailing address.	Phone (h):
Phone (m):	Fax No:
If you operate in a licenced environment (W.A. and ACT only), do you hold appropriate Licences/Registrations/Business Certificates?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Certificate/s Attached (if applicable)
Do you hold MIAA Accredited Mortgage Consultant (AMC) status?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Certificate Attached (if applicable)
Signed:	

<b>2. Originator Group (Sponsor) Details:</b>	
Group Name:	
Contact Name & Position:	Contact Phone No:
We hereby confirm the applicant is suitably qualified and support their application for accreditation.	
Signed: For and on behalf of the Originator Group	

<b>3. Transfer of Accreditation:</b>	<b>(Outgoing originator group to complete this section only if you are transferring your accreditation from another group; or obtain written authorisation)</b>
Outgoing Originator Group:	Signed for and on behalf of the outgoing Originator Group:
Contact Name & Position:	Contact Phone No:
Or: <input type="checkbox"/> Authorisation attached from outgoing originator group.	

<b>Bank Use Only:</b>	
<input type="checkbox"/> Training and Accreditation testing attached (not required if Authorisation attached as per Section 3 above) <input type="checkbox"/> Licences/Registrations/Business Certificates checked	
Signed By:	Checked and Signed By: (Bank Support)
Relationship Manager Name:	Name:
<input type="checkbox"/> NTBS Owners Maintenance updated <input type="checkbox"/> Individual Broker ID <input type="checkbox"/> Internet Logon for STP Updated <input type="checkbox"/> Issue Welcome Letter / Certificates (to RM)	
Entered By:	Checked By: