

# PROJECT APPLICATION FORM - A



**PKKP**  
-TRUST-  
Puutu Kunti Kurrama and Pinikura

## THIS FORM IS FOR:

1. PKKP MEMBERS WANTING TO MAKE AN APPLICATION TO THE TRUST FOR AN EVERYDAY TRANSACTION WHERE THERE IS A CURRENT POLICY

## APPLICANT DETAILS

Member Name	
Postal Address	
Phone	
Email	

## I WISH TO ACCESS MY FOLLOWING BENEFITS:

Direct Benefits Trust	Charitable Trust	
<input type="checkbox"/> Cash	<input type="checkbox"/> Funeral Assistance	<input type="checkbox"/> Education Assistance
Amount:	Amount:	Amount:
<input type="checkbox"/> Capacity Building Fund	<input type="checkbox"/> Headstone	<input type="checkbox"/> Computer Assistance
Amount:	Amount:	Amount:
<input type="checkbox"/> Sporting Fund	<input type="checkbox"/> Lore Fund	<input type="checkbox"/> Financial Advice
Amount:	Amount:	Amount:
<b>Home Loan Grant – Requires a different application form, request a form from Taliah – Taliah.payne@perpetual.com.au</b>	<input type="checkbox"/> Basic Housing	<input type="checkbox"/> Older Members Assistance
	Amount:	Amount:
	<input type="checkbox"/> Estate Management	<input type="checkbox"/> Medical Assistance
Amount:	Amount:	Amount:

Any details you wish to provide:

## HOW DO YOU WANT THAT PROCESSED FOR YOU?

<b>DBT</b>	<input type="checkbox"/> EFT (Bank Account)	<input type="checkbox"/> NAB Card	<input type="checkbox"/> Purchase Order	<input type="checkbox"/> Direct to Supplier
<b>CT</b>	<input type="checkbox"/> NAB Card	<input type="checkbox"/> Purchase Order	<input type="checkbox"/> Direct to Supplier	

## DO YOU AUTHORISE THIS APPLICATION? YES NO

PRINT NAME:	
DATE:	
SIGN:	