

**REQUEST FOR ACCREDITATION**

- New Accreditation       Transfer Accreditation  
 Please tick if applying for Asset Finance only

**Aggregator:** \_\_\_\_\_

**Broker Details**

**Credit Representative Number:** \_\_\_\_\_

**Broker Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Postal Address:** \_\_\_\_\_

**Trading Address:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Land Line:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Linkedin:** \_\_\_\_\_

I confirm that the above broker is a current member of: " \_\_\_\_\_ " aggregation services.  
I also confirm that we hold on file current copies of (please tick each held on file):

- |   |  |
|---|--|
| <input type="checkbox"/> MFAA /FBAA Membership        | <input type="checkbox"/> AML Certificate / Course Completion |
| <input type="checkbox"/> Clean Police Check           | <input type="checkbox"/> Business Registration               |
| <input type="checkbox"/> Professional Indemnity Cover | <input type="checkbox"/> Australian Credit Registration      |

Signed on behalf of " \_\_\_\_\_ " Aggregation

Position: \_\_\_\_\_ Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email back to [accreditations@paramountmortgages.com.au](mailto:accreditations@paramountmortgages.com.au)

**Paramount Mortgage Services**

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