

## SECTION 1: ASSOCIATION IDENTIFICATION PROCEDURE (MANDATORY)

### 1.1 GENERAL INFORMATION

Full Name of Association

Full Business, trading or other name(s), other than the association name (if any)

State/Territory or country (if not Australia) of establishment/incorporation

Date of establishment/incorporation (DD/MM/YYYY)

 /  / 

Industry

	Full given name(s)	Surname
Chairman		
Secretary		
Treasurer		

### 1.2 ASSOCIATION TYPE

Incorporated Association (complete section 1.3)

Provide ID number issued upon incorporation e.g. registration/incorporation number

Unincorporated Association (complete section 1.4)

Full Name of the association member requesting the product/service (complete separate BT Individual & Sole Trader ID form for this member)

### 1.3 INCORPORATED ASSOCIATION DETAILS

Select one of the following and provide details in the address boxes below (not a PO Box)

- Principal place of administration
- Registered office
- Residential address of secretary
- Residential address of chairman/president
- Residential address of treasurer


 State  Postcode

 Country, if not Australia

### 1.4 UNINCORPORATED ASSOCIATION DETAILS

Full address of the association's principal place of administration (not a PO Box)


 State  Postcode

 Country, if not Australia

ABN

### SECTION 2: TAX INFORMATION (MANDATORY)

Are you a resident of a country other than Australia for tax purposes?

- Yes (complete section 2)
- No (proceed to section 3)

Country/ies outside of Australia in which the association is a resident for tax purposes and country's associated Tax Identification Number (TIN)\*

\* A TIN is an identifying number or equivalent used for tax purposes. If a 'TIN' is not available, please specify the reason against the appropriate country.

Note: If the association has more than 3 countries in which they are a tax resident, please provide the details on a separate form.

Country 1

Foreign TIN 1

Reason (if TIN not applicable)

- Foreign TIN not issued by this country
- Foreign TIN pending issue by the country's tax authority

Country 2

Foreign TIN 2

Reason (if TIN not applicable)

- Foreign TIN not issued by this country
- Foreign TIN pending issue by the country's tax authority

Country 3

Foreign TIN 3

Reason (if TIN not applicable)

- Foreign TIN not issued by this country
- Foreign TIN pending issue by the country's tax authority



### SECTION 3: BENEFICIAL OWNERSHIP (MANDATORY)

Provide the names of ALL individual members who own directly or indirectly control 25% or more of the Association, such as the Chairman, President, Treasurer or Secretary of the association.

**Complete separate individual customer ID Forms for each of these individuals.**

Role	Full Given Name(s)	Surname

If there are more Beneficial Owners, provide details on a separate sheet and tick this box

### SECTION 4: ADDITIONAL INFORMATION (MANDATORY)

#### 4.1 SOURCE OF FUNDS

This refers to where your funds came from in regard to deposits into the account. Please note you may have multiple sources of funds. Please indicate all sources of funds below.

- |                                                              |                                                   |
|--------------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Commission                          | <input type="checkbox"/> Bonus                    |
| <input type="checkbox"/> Business income                     | <input type="checkbox"/> Business profits         |
| <input type="checkbox"/> Investment income                   | <input type="checkbox"/> Corporate investments    |
| <input type="checkbox"/> Rental income                       | <input type="checkbox"/> Loan                     |
| <input type="checkbox"/> Capital injection                   | <input type="checkbox"/> Insurance payment        |
| <input type="checkbox"/> Government grant                    | <input type="checkbox"/> Sale of assets           |
| <input type="checkbox"/> Liquidation of assets               | <input type="checkbox"/> Mergers and acquisitions |
| <input type="checkbox"/> Gift/Donation                       | <input type="checkbox"/> Controlled money account |
| <input type="checkbox"/> Tax refund                          | <input type="checkbox"/> Compensation payment     |
| <input type="checkbox"/> Additional sources (please specify) |                                                   |

#### 4.2 SOURCE OF WEALTH

This refers to where or how you have built your net worth. Please note that you may have multiple sources of wealth. Please indicate all sources of wealth below.

- |                                                              |                                                   |
|--------------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Business income                     | <input type="checkbox"/> Business profits         |
| <input type="checkbox"/> Investment income                   | <input type="checkbox"/> Corporate investments    |
| <input type="checkbox"/> Rental income                       | <input type="checkbox"/> Insurance payment        |
| <input type="checkbox"/> Owns property                       | <input type="checkbox"/> Compensation payment     |
| <input type="checkbox"/> Sale of assets                      | <input type="checkbox"/> Liquidation of assets    |
| <input type="checkbox"/> Gift/Donation                       | <input type="checkbox"/> Mergers and acquisitions |
| <input type="checkbox"/> None                                | <input type="checkbox"/> Controlled money account |
| <input type="checkbox"/> Additional sources (please specify) |                                                   |

### SECTION 5: ASSOCIATION VERIFICATION PROCEDURE (MANDATORY)

#### 5.1 INCORPORATED ASSOCIATION VERIFICATION PROCEDURE

Information to be verified:

- full name of the Association
- ID number issued on Incorporation (if any).

Tick	Verification options (at least one of the following options used to verify the Incorporated Association)
<input type="checkbox"/>	A search of ASIC or the government body responsible for the incorporation of the association.
<input type="checkbox"/>	An original, certified copy or certified extract of the Constitution or Rules of the association.*
<input type="checkbox"/>	An original, certified copy or certified extract of the minutes of a meeting of the association.*
<input type="checkbox"/>	Land Titles Office search (of the relevant State/Territory) for strata corporations
<input type="checkbox"/>	Search of the relevant government online directory (if a body corporate)
<input type="checkbox"/>	<i>Copy of the legislation establishing the body corporate (if a body corporate)</i>

#### 5.2 UNINCORPORATED ASSOCIATION VERIFICATION PROCEDURE

Information to be verified:

- Full name of the Association

Tick	Verification options (at least one of the following to verify the Unincorporated Association)
<input type="checkbox"/>	An original, certified copy or certified extract of the Constitution or Rules of the association.*
<input type="checkbox"/>	An original, certified copy or certified extract of the minutes of a meeting of the association.*

*\* Documents that are written in a language that is not English must be accompanied by an English translation prepared by National Accreditation Authority for Translators and Interpreters (NAATI) translator.*

#### IMPORTANT NOTE:

- Ensure that individual customer ID Forms have been provided for ALL the Association's Beneficial Owners as per section 3 as well as for the individual completing this form, as per section 1.2.
- Attach a legible certified copy of the ID documentation used to verify the association and selected member (where applicable), including any required translations .



## SECTION 6: CUSTOMER DECLARATION (MANDATORY)

I declare that to the best of my knowledge the information I have provided above is true and correct as at the date of this document. I understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the *Anti-Money Laundering and Counter Terrorism Financing Act 2006*, and the *Tax Laws Amendment (Implementation of the Common Reporting Standards) Act 2016*.

Full name

Position held

Signature of authorised person

Date  
(DD/MM/YYYY)

## SECTION 7: RECORD VERIFICATION PROCEDURE (OFFICE USE ONLY)

ID Document details	Document 1
Verified from	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document issuer/website	
Document type	
Issue date/search date	/ /
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

ID Document details	Document 2 (if required)
Verified from	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document issuer/website	
Document type	
Issue date/search date	/ /
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

### By completing and signing this Record of Verification Procedure I declare that:

- an identity verification procedure has been completed in accordance with the AML/CTF Rules, in the capacity of an AFSL holder or their authorised representative;
- Individual customer ID Forms have been provided for ALL of the Association's Beneficial Owners

AFS Licensee Name (if applicable)

AFSL Number (if applicable)

Representative/Employee Name and Staff ID

Phone number

Signature

Date Verification Complete  
(DD/MM/YYYY)

## APPENDIX A: PROOF OF IDENTIFICATION

### A. HOW TO CERTIFY YOUR IDENTITY DOCUMENTS

#### The documents applicable to you can be certified by either:

- Your financial adviser – where they have introduced you to BT, have an AFSL and 2 or more continuous years of service with one or more licensees. Your financial adviser must complete the appropriate Identification Form and attach it to your Application together with the original certified identification documents.
- Any other eligible certifier as listed in this Section. An original certified copy is a document that has been certified as a true copy of an original document.

#### To certify an identity document:

- Take the original identity document and a photocopy to one of the people listed below (eligible certifiers) and ask them to certify that the photocopy is a true and correct copy of the original document
- That person will need to print their name, date and qualification/occupation which makes them an eligible certifier on the photocopy
- The certifier must also include the following statement on the photocopy 'I certify that this is a true copy of the original document'
- Photocopies of certified documents will not be accepted.
- The original signature of the certifier must be visible.

### LIST OF ELIGIBLE PERSONS WHO CAN CERTIFY YOUR IDENTITY DOCUMENTS

The following people can certify your identification documents, for a complete list of people who can certify your identification documents please refer to our website <https://www.bt.com.au/personal/help/how-to-certify-id.html>

Note:

- Customers can use certifiers in categories 1 to 17 where the certifier is an officer who holds these positions within Australia; or
- Where the certifier does not meet the above criteria, ONLY certifiers in category 11, 12 or 13 may be used.
  1. A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
  2. A judge of a court
  3. A magistrate
  4. A chief executive officer of a Commonwealth court
  5. A registrar or deputy registrar of a court
  6. A Justice of the Peace
  7. A notary public
  8. A Police Officer
  9. An agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public



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10. A permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
11. An Australian consular officer or an Australian diplomatic officer (within the meaning of the *Consular Fees Act 1955*)
12. A bank or building society officer with 2 or more years continuous years of service (includes acceptable international bank)
13. A finance company officer with 2 or more continuous years of service (includes acceptable international bank)
14. An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees
15. A member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the Institute of Public Accountants
16. A Commissioner for Declarations
17. A Commissioner for Affidavits

