

# Identification Form - Government Body



## INSTRUCTIONS

- This form is for GOVERNMENT BODIES only. GOVERNMENT BODIES include governments of a country, an agency or authority of the government of a country, the government of part of a country or an agency or authority of the government of part of a country (including a state, province, county or municipality). To be considered a GOVERNMENT BODY, the earnings of any agency or authority must be credited to the account of the government, with no portion inuring to the benefit of any private person/s.
- Provide details for the Beneficial Owners of Foreign Government Bodies (Section 1.3) and provide separate INDIVIDUAL ID Forms for each of these Beneficial Owners, page 3.
- Black or blue pen please.
- Please use BLOCK letters.
- Print ✓ in the appropriate boxes.
- If you have any questions about this form please contact us on 1300 133451

## ISSUER DETAILS

1. Issuer/Fund Name:
2. Security Code:
3. HIN/SRN/Investor Number:

## SECTION 1: GOVERNMENT BODY IDENTIFICATION PROCEDURE

### Section 1.1: General Information

Full name of Government Body

**Principal place of operations** (PO Box is not acceptable).

Street

Suburb

State

Postcode

Country

**1.2 Government Information** (select only ONE of the following categories and provide the information requested)

Commonwealth of Australia Government Body

Australian State or Territory Government Body, please specify State or Territory

Foreign (Non-Australian) Government Body, please specify Country

If the Government Body is Australian, proceed to Section 2 (no need to provide Beneficial Ownership information).

### 1.3 Beneficial Ownership

For Foreign Government Bodies, provide the names of the individuals that directly or indirectly control the Government Body, such as the Chairman, President, Treasurer or Secretary of the Government Body.

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

Full given name(s)

Surname

Role (such as Chairman, President, etc.)

**Please Note: Beneficial Owner/s must be listed above and individual ID Forms completed for all Beneficial Owners.**

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

## SECTION 2: GOVERNMENT BODY VERIFICATION PROCEDURE

Information to be verified:

- Full name of the government body
- Full address of the government body's principal place of operations
- That the government body is a body of the Commonwealth of Australia, a State or Territory of Australia or a foreign country

**Verification options** (select one or more of the following options used to verify the Government Body)

Search of the relevant Commonwealth, State, Territory or Foreign government website for confirmation of the body's existence.\*

Search of the relevant Commonwealth, State, Territory or Foreign Country register of government bodies.\*

A copy or extract of the legislation establishing the body obtained from a reliable and independent source, such as a government website.\*

\* Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

### IMPORTANT NOTE:

- Ensure that individual customer ID Forms have been provided for Foreign Government Bodies as per 1.3 AND
- Attach a legible certified copy of the ID documentation used to verify the government body (and any required translation) OR
- Alternatively, if agreed between your licensee and the product issuer, complete the Record of Verification Procedure section below, and DO NOT attach copies of the ID Documents

## SECTION 3: RECORD OF VERIFICATION PROCEDURE

### ID DOCUMENT

Verified From                      Performed search                      Copy of legislation sighted

URL link /

Full name of legislation

Search date

Date Verified

Accredited English Translation                      N/A                      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 the Beneficial Owners (for Foreign Government Bodies)

AFS Licensee Name    AFSL No.

Representative/ Employee Name    Phone No.

Signature    Date Verification Completed

# Identification Form - Individuals

## INSTRUCTIONS

- Complete one form for each individual.
- Tax information must be collected from the individual
- Contact your licensee if you have any queries.
- Black or blue pen please
- Please use BLOCK letters.
- Print ✓ in the appropriate boxes.
- If you have any questions about this form please contact us on 1300 133451

## SECTION 1: PERSONAL DETAILS

Full given name(s) Surname Date of Birth (dd/mm/yyyy)

Residential Address (PO Box is not acceptable)

Street

Suburb

State

Postcode

Country

## SECTION 2: TAX INFORMATION

Tax Residency rules differ by country. Whether an individual is tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency.

Please answer **both** tax residency questions:

Is the individual a tax resident of Australia? Yes No

Is the individual a tax resident of another Country? Yes No

**If the individual is a tax resident of a country other than Australia, please provide their tax identification number (TIN) or equivalent below. If they are a tax resident of more than one other country, please list all relevant countries below.**

*A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or a Social Security Number in the US. If a TIN is not provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.*

1. Country TIN If no TIN, list reason A, B or C

2. Country TIN If no TIN, list reason A, B or C

3. Country TIN If no TIN, list reason A, B or C

*If there are more countries, provide details on a separate sheet and tick this box.*

**Reason A** The country of tax residency does not issue TINs to tax residents

**Reason B** The individual has not been issued with a TIN

**Reason C** The country of tax residency does not require the TIN to be disclosed

## SECTION 3: VERIFICATION PROCEDURE

Verify the individual's full name; and EITHER their date of birth or residential address.

- Complete Part I (or if the individual does not own a document from Part I, then complete either Part II or III.)
- Contact your licensee if the individual is unable to provide the required documents.

### Part I – Acceptable Primary Photographic Id Documents

Select ONE valid option from this section only

Australian State / Territory driver's licence containing a photograph of the person

Australian passport (a passport that has expired within the preceding 2 years is acceptable)

Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person

Foreign passport or similar travel document containing a photograph and the signature of the person\*

### Part II – Acceptable Secondary Id Documents

- Should Only Be Completed If The Individual Does Not Own A Document From Part I

Select ONE valid option from this section

Australian birth certificate

Australian citizenship certificate

Pension card issued by Department of Human Services (previously known as Centrelink)

AND ONE valid option from this section

A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address

A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.

A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address)

If under the age of 18, a notice that: was issued to the individual by a school principal within the preceding 3 months; and contains the name and residential address; and records the period of time that the individual attended that school

### PART III – ACCEPTABLE FOREIGN PHOTOGRAPHIC ID DOCUMENTS

- Should only be completed if the individual does not own a document from Part I

Select ONE valid option from this section only

Foreign driver's licence that contains a photograph of the person in whose name it issued and the individual's date of birth\*

National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued\*

\*Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator

#### IMPORTANT NOTE:

- Either attach a legible certified copy of the ID documentation used to verify the individual (and any required translation)

OR

- Alternatively, if agreed between your licensee and the product issuer, complete the Record of Verification Procedure section next and DO NOT attach copies of the ID Documents

**SECTION 4: RECORD OF VERIFICATION PROCEDURE**

ID DOCUMENT	Document 1		Document 2 (if required)	
	Original	Certified copy	Original	Certified copy
Verified From				
Document Issuer				
Issue Date				
Expiry Date				
Document Number				
Accredited English Translation	N/A	Sighted	N/A	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 and
- the tax information provided is reasonable considering the documentation provided.

AFS Licensee Name

AFSL No.

Representative/ Employee Name

Phone No.

Signature

Date Verification Completed