

1. COMPANY DETAILS

Registered Business Name <input type="text"/>	Australian Company Number <input type="text"/>	Account Number (Office use only) <input type="text"/>
Company's Registered Office <input type="text"/>	Principal place of business (if different from Registered Office) <input type="text"/>	
Suburb <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>
Email (default address for all correspondence) <input type="text"/>	Business Phone Number <input type="text"/>	
	Company Type	<input type="checkbox"/> Proprietary* <input type="checkbox"/> Public Unlisted
		<input type="checkbox"/> Public Listed

TAX FILE NUMBER OR WITHHOLDING TAX EXEMPTION

Note: The collection and use of your TFN is regulated by applicable tax and privacy laws. It is not compulsory to provide your TFN, however if you do not, withholding tax will be deducted from your accounts.

2. DIRECTORS, SIGNATORIES & BENEFICIAL OWNERS DETAILS

Instructions for completion:

- Please tick the box in each sections to indicate the person's status as a beneficial owner, director or a signatory. A person can be any or all of these. For example, a single shareholder/director can be ticked as the beneficial owner, a director and as a signatory.
- *For proprietary companies, please list each beneficial owner (a person owning 25% or more of the company), each director and each signatory on the account.

Person 1	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Director	<input type="checkbox"/> Signatory	Person 2	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Director	<input type="checkbox"/> Signatory
Member Number (if applicable) <input type="text"/>	or Client Number (office use only) <input type="text"/>	Member Number (if applicable) <input type="text"/>	or Client Number (office use only) <input type="text"/>	Member Number (if applicable) <input type="text"/>	or Client Number (office use only) <input type="text"/>	Member Number (if applicable) <input type="text"/>	or Client Number (office use only) <input type="text"/>
Given Name(s) <input type="text"/>	Other Name(s) <input type="text"/>	Given Name(s) <input type="text"/>	Other Name(s) <input type="text"/>	Given Name(s) <input type="text"/>	Other Name(s) <input type="text"/>	Given Name(s) <input type="text"/>	Other Name(s) <input type="text"/>
Surname <input type="text"/>	Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>	Surname <input type="text"/>	Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>	Surname <input type="text"/>	Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>	Surname <input type="text"/>	Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>
Home Phone Number <input type="text"/>	Mobile Phone Number <input type="text"/>	Home Phone Number <input type="text"/>	Mobile Phone Number <input type="text"/>	Home Phone Number <input type="text"/>	Mobile Phone Number <input type="text"/>	Home Phone Number <input type="text"/>	Mobile Phone Number <input type="text"/>
Residential Address <input type="text"/>		Residential Address <input type="text"/>		Residential Address <input type="text"/>		Residential Address <input type="text"/>	
Suburb <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>		Suburb <input type="text"/>	State <input type="text"/>	Postcode <input type="text"/>	
Email <input type="text"/>				Email <input type="text"/>			

Person 1 (Continued)

Are you a Tax Resident in a jurisdiction other than Australia?

Yes No

If yes, please specify the country and provide your Tax Identification Number (TIN):

Country 1	TIN
<input type="text"/>	<input type="text"/>
Country 2	TIN
<input type="text"/>	<input type="text"/>
Country 3	TIN
<input type="text"/>	<input type="text"/>

Person 2 (Continued)

Are you a Tax Resident in a jurisdiction other than Australia?

Yes No

If yes, please specify the country and provide your Tax Identification Number (TIN):

Country 1	TIN
<input type="text"/>	<input type="text"/>
Country 2	TIN
<input type="text"/>	<input type="text"/>
Country 3	TIN
<input type="text"/>	<input type="text"/>

Note: A TIN is the tax reference number issued to you by the tax office in the country where you are a resident for tax purposes. Where a country does not issue a TIN, complete an equivalent number, for example a social security, national insurance, personal identification or a resident registration number.

Person 3

Beneficial Owner Director Signator

Member Number (if applicable) or Client Number (office use only)

Given Name(s) Other Name(s)

Surname Date of Birth

/ /

Home Phone Number Mobile Phone Number

Residential Address

Suburb State Postcode

Email

Person 4

Beneficial Owner Director Signatory

Member Number (if applicable) or Client Number (office use only)

Given Name(s) Other Name(s)

Surname Date of Birth

/ /

Home Phone Number Mobile Phone Number

Residential Address

Suburb State Postcode

Email

Person 3 (Continued)

Are you a Tax Resident in a jurisdiction other than Australia?

Yes No

If yes, please specify the country and provide your Tax Identification Number (TIN):

Country 1	TIN
<input type="text"/>	<input type="text"/>
Country 2	TIN
<input type="text"/>	<input type="text"/>
Country 3	TIN
<input type="text"/>	<input type="text"/>

Person 4 (Continued)

Are you a Tax Resident in a jurisdiction other than Australia?

Yes No

If yes, please specify the country and provide your Tax Identification Number (TIN):

Country 1	TIN
<input type="text"/>	<input type="text"/>
Country 2	TIN
<input type="text"/>	<input type="text"/>
Country 3	TIN
<input type="text"/>	<input type="text"/>

3. SIGNATORY DECLARATION

You agree to become a member of Australian Military Bank when we open this account. For further information about membership, please refer to our Constitution. The company acknowledges that it is responsible for ensuring that any persons appointed as nominated officer or signatory on the account conduct themselves responsibly and in accordance with the instructions of the company.

Personal Information

I/We acknowledge and agree that Australian Military Bank and any company related to Australian Military Bank can collect and disclose my personal information as required by law.

I/We agree that if Australian Military Bank engages anyone (a Service Provider) to do something on its behalf then Australian Military Bank and the service provider may exchange with each other any personal information the service provider lawfully obtains about me/us in the course of acting on Australian Military Bank's behalf. Service providers may include but are not limited to solicitors and legal advisers, accountants and auditors, property valuers, printers and mailing services, insurers and mortgage insurers, financial planners, retirement product managers, credit card issuers, ATM/EFTPOS service providers, collection agencies, conveyancers, credit reporting agencies, and Government agencies which regulate our products and services.

Person 1 (Print Name)

Person 1 (Signature)

 Date / /

Person 2 (Print Name)

Person 2 (Signature)

 Date / /

Person 3 (Print Name)

Person 3 (Signature)

 Date / /

Person 4 (Print Name)

Person 4 (Signature)

 Date / /

OFFICE USE ONLY

- Signatories/owners verified Equifax search completed FSG supplied T&C supplied F&C supplied
 Privacy statement supplied Internet banking access granted to signatories Interaction

Staff Name and Operator Number

Supervisor Signature

 Date / /

Member Number Created