

**Client Services contact details****Phone**

Within Australia: 1300 097 995

International: +61 3 9616 8614

**Email**

mba@unitregistry.com.au

## Instructions: identification forms

<b>Which form?</b>	<p>There are three forms that follow: one each for individuals, companies and trustees. Choose the form that is applicable to you.</p> <p>If you are a partnership, an association, a co-operative or a Government body, then contact us and we will send a more appropriate form to you.</p>
<b>Copies or originals?</b>	<p>This form asks you to send us certain documents. Please send us certified copies, not originals. We will keep what you send to us.</p>
<b>Certifying copies</b>	<p>You must have someone certify the copies you send to us. The following people can be the certifier: You must certify the copies you send to us by one of the following certifiers:</p> <ul style="list-style-type: none"><li>• a Justice of the Peace</li><li>• a Notary public (for the purposes of the Statutory Declaration Regulations 1993)</li><li>• an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public</li><li>• 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</li><li>• 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</li><li>• an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)</li><li>• a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)</li><li>• a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership</li><li>• a solicitor or barrister (that is, 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))</li><li>• a Judge of a court</li><li>• a magistrate</li><li>• a chief executive officer of a Commonwealth court</li><li>• a registrar or deputy registrar of a court</li><li>• a Police officer</li><li>• an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955).</li></ul>
<b>What should the person certifying write?</b>	<p>"I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as a true copy of the original document." Each page should be initialed by the person certifying your documents.</p>
<b>Not in English?</b>	<p>Documents not in English must be accompanied by an English translation prepared by an accredited translator.</p>

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## Identification form – Individuals

A separate form is required for each investor in the case of joint holdings. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees instead.

1. Please complete this identification form in BLOCK letters and using a black pen.
2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

**Send your documents to our Administrator.**

You can return your forms by post to:

Maple-Brown Abbott  
GPO Box 804  
Melbourne VIC 3001

## 1 Personal details

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

 /  / 

Usual occupation

## 2 Verification procedure – individual investor

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

### Group 1

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**  
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**  
showing your date of birth, signature and photo
- ☐ **Australian passport**  
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**  
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**  
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**  
showing your date of birth, signature and photo.

### Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**
- ☐ **Centrelink pension or health card**  
please copy the front and back.

**PLUS, provide a certified copy of one of the following:**

- ☐ **a Government issued notice**  
one which shows your name and residential address, not more than 12 months' old
- ☐ **a rates or utilities notice**  
one which shows your name and residential address, not more than 3 months' old
- ☐ **ATO notice**  
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

## 3 Signature

Signature

Please print full name

Date (DD/MM/YYYY)

 /  /

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[mba@unitregistry.com.au](mailto:mba@unitregistry.com.au)

## Identification form – Australian and Foreign companies

If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

If you are a trustee, do NOT complete this form. Complete the Identification form – Trusts and Trustees instead.

1. Please complete this identification form in BLOCK letters and using a black pen.
2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

**Send your documents to our Administrator.**

You can return your forms by post to:

Maple-Brown Abbott  
GPO Box 804  
Melbourne VIC 3001

## 1 Company details

### 1.1 General information

Full name of company

Nature of business

### 1.2 Australian companies

Principal place of business (if different to registered office address).

A PO Box/RMB/Locked Bag is not acceptable.

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

Please provide us with certified copies of:

☐ an ASIC search

### 1.3 Foreign companies

Country of formation

Registered in Australia?

☐ No ☐ Yes – what is the ARBN

Registered in country of formation?

☐ No ☐ Yes – name of regulator/exchange

Identification number issued by foreign registration body

If you are a foreign company registered in Australia write your principal place of business in Australia or the full name and address of your Australian agent.

If you are a foreign company not registered in Australia write your registered business address in country of formation or principal place of business if there is not a registered address.

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

Please provide us with certified copies of one of the following:

☐ an ASIC or foreign regulator search

☐ an ASIC or foreign regulator certificate of registration.

## 2 Company type

Please complete the section below for public companies (section 2.1) or private companies (section 2.2) as applicable.

### 2.1 Public company

Are you a public company?

☐ No ☐ Yes

If yes, please proceed to section 3.

### 2.2 Private company

Are you a private company?

☐ No ☐ Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

#### Director details

How many directors are there?

Provide the full name of each director.

#### Director 1

Title

Full given names

Surname

#### Director 2

Title

Full given names

Surname

#### Director 3

Title

Full given names

Surname

**Director 4**

Title Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

**3 Regulated/Listed companies****Are you an Australian listed company?**☐ No ☐ Yes – please provide name of market/exchange

Market/exchange

**Are you a majority-owned subsidiary of an Australian listed company?**☐ No ☐ Yes – please provide name of listed company and market/exchange

Company

Market/Exchange

**Are you a regulated company?**

One that which is licensed by an Australian Commonwealth, State or Territory statutory regulator.

☐ No ☐ Yes – please provide details of the regulator and licence number

Regulator

Licence number

If you answered yes to any of these questions, please provide us with a certified copy of one of the following and sign the form at the end. For you, this form is then complete.

- ☐ an ASIC search
- ☐ a search of the licence or other records of the relevant regulator
- ☐ a public document issued by the company
- ☐ a search of the relevant market/exchange

**4 Non-regulated/non-listed companies**

If you answered no to all the questions in section 3, please fill in the sections 4.1, 4.2 and 4.3 below.

**4.1 Beneficial owner details**

Provide details of all beneficial owners who are individuals who, through one or more shareholdings, ultimately own 25% or more of the company's issued capital or who control (whether directly or indirectly) the company and either the date of birth or full residential address of each beneficial owner.

**HELP**

**Control:** includes control as a result of, or by means of, trusts, agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating policies.

**Beneficial owner 1**

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

**Residential address/Registered office address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Beneficial owner 2**

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

**Residential address/Registered office address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Beneficial owner 3**

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

**Residential address/Registered office address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Beneficial owner 4**

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

**Residential address/Registered office address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Verification procedure - beneficial owners**

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

**Group 1**

Provide a certified copy of one of these:

☐ **Australian driver's licence**  
showing your photo, and please copy the front and back

☐ **foreign driver's licence**  
showing your date of birth, signature and photo

☐ **Australian passport**  
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you

☐ **foreign passport**  
showing your signature and photo, and please copy the pages which identify you

☐ **Australian State or Territory Government issued ID card**  
showing your date of birth, signature and photo

☐ **foreign Government issued ID card**  
showing your date of birth, signature and photo.

**Group 2**

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

☐ **Australian or foreign government issued birth certificate**

☐ **Australian or foreign government issued citizenship certificate**

☐ **Centrelink pension or health card**  
please copy the front and back.

PLUS provide a certified copy of one of the following:

☐ **a Government issued notice**  
one which shows your name and residential address, not more than 12 months old

☐ **a rates or utilities notice**  
one which shows your name and residential address, not more than 3 months old

☐ **ATO notice**

one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

**4.2 Voting rights**

If there are any other individuals, who have not been listed above in section 4.1, and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please provide their name, date of birth, and residential address on a separate sheet and attach to this form.

**4.3 Senior Managing Official details**

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names

Surname

Date of birth (DD/MM/YYYY)

 /  / 

Company title

**Residential address/Registered office address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**HELP**

**Senior managing official:** an individual who makes, or participates in making, decisions that affect the whole, or a substantial part of the company, or that may significantly affect the company's financial standing.

**5 Signing instructions**

Where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Signature of director 1

Please print full name

Date (DD/MM/YYYY)

 /  / 

Company officer (please indicate company capacity)

☐ Director

☐ Sole director and company secretary

Signature of director 2/company secretary

Please print full name

Date (DD/MM/YYYY)

 /  / 

Company officer (please indicate company capacity)

☐ Director

☐ Company secretary



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## Identification form – Trusts and Trustees

If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

1. Please complete this identification form in BLOCK letters and using a black pen.
2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Instructions' page for more information on getting your documents certified.
3. Include this identification form and certified copies of your ID documents with your initial application form when you send it to us.

**Send your documents to our Administrator.**

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GPO Box 804  
Melbourne VIC 3001

## 1 Trust details

Full name of trust

Business name (if any)

Country in that the trust was established

## 2 Type of trust

### 2.1 Regulated trusts

This includes complying superannuation funds and self-managed superannuation funds

**Superannuation fund** - or another type of trust registered and regulated by an Australian Commonwealth statutory regulator

☐ No ☐ Yes

If yes, please tell us:

The trust's ABN

The regulator if not APRA or the ATO

Any licence number

**Registered managed investment scheme**

☐ No ☐ Yes

If yes, please tell us the ARSN

**Government superannuation fund**

☐ No ☐ Yes

If yes, please tell us the name of the Act that regulates the trust

If you answered yes to any of these questions, then please provide a certified copy of one of the following:

- ☐ **superannuation funds**  
go to [www.abn.business.gov.au](http://www.abn.business.gov.au), select the 'Super Fund Lookup' option and print out the results for your super fund
- ☐ **registered managed investment schemes**  
an ASIC search of the scheme
- ☐ **Government superannuation funds**  
an extract of the establishing legislation.

### 2.2 Non-regulated trusts

Including family trusts, testamentary trusts and other unit trusts, deceased estates and charitable trusts (but not including self-managed superannuation funds)

Is the trust a non-regulated trust?

☐ No ☐ Yes

If yes, please specify the type of trust

Please provide full name, address and date of birth of all beneficial owners who are individuals who own 25% or more of the trust income or assets or who control (whether directly or indirectly) the trust and either the date of birth or full residential address of each beneficial owner:

#### HELP

**Control:** includes control as a result of, or by means of, trusts, agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating policies.

#### Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

Usual occupation/Nature of business

#### Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode  Country

**Beneficial owner 2**

Title  Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)  
 DD /  MM /  YYYY

Usual occupation/Nature of business

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit  Street number

Street name

Suburb  State

Postcode  Country

**Beneficial owner 3**

Title  Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)  
 DD /  MM /  YYYY

Usual occupation/Nature of business

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit  Street number

Street name

Suburb  State

Postcode  Country

**Beneficial owner 4**

Title  Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)  
 DD /  MM /  YYYY

Usual occupation/Nature of business

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit  Street number

Street name

Suburb  State

Postcode  Country

**Please provide the name of all beneficiaries that are not beneficial owners.**

If the trust deed describes the beneficiaries by reference to member of a class please provide details of, the class to which the beneficiaries belong e.g. family members, unit holders, un-named charities on a separate sheet and attach to this form.

**Beneficiary 1**

Title  Full given names

Surname

**Beneficiary 2**

Title  Full given names

Surname

**Beneficiary 3**

Title  Full given names

Surname

#### Beneficiary 4

Title Full given names

Surname

Please provide the name of the **appointor** of the trust, if applicable

##### HELP

**Appointor:** the appointor has the power to appoint or remove the trustees of the trust. Not all trusts have an **appointor**.

Name of trust settlor

##### HELP

**Settlor:** this is the person that creates the trust. The settlor may be, for example, your accountant or solicitor.

Note: you do not need to provide the name of the trust settlor if they are deceased, or the material asset at the time the trust was established was less than \$10,000.

If you are a non-regulated trust, please provide us with certified copies of one of the following:

- ☐ **Trust deed**  
or an extract of the trust deed showing the full name of the trust and any named trust settlor
- ☐ **Other documentation**  
confirming the full name of the trust and the name of the trust settlor

### 3 Trustee details

#### 3.1 Verification procedure – individual trustee

Title Full given names

Surname

Date of birth (DD/MM/YYYY)  
 DD /  MM /  YYYY

Usual occupation

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

##### Group 1

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**  
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**  
showing your date of birth, signature and photo
- ☐ **Australian passport**  
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**  
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**  
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**  
showing your date of birth, signature and photo.

##### Group 2

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**
- ☐ **Centrelink pension or health card**  
please copy the front and back.

**PLUS** provide a certified copy of one of the following:

- ☐ **a Government issued notice**  
one which shows your name and residential address, not more than 12 months' old
- ☐ **a rates or utilities notice**  
one which shows your name and residential address, not more than 3 months' old
- ☐ **ATO notice**  
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

**For each corporate beneficial owner please provide:**

- ☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

#### 3.2 Verification procedure – company trustees

##### 3.2.1. General information

Full name of company trustee

Nature of business

ACN

### 3.2.2. Australian company trustee

Place of business (if different to registered office address)

A PO Box/RMB/Locked Bag is not acceptable.

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

### 3.2.3 Foreign company trustee

Country of formation

Registered in Australia?

☐ No ☐ Yes

If yes, please provide the ARBN

Registered in that country?

☐ No ☐ Yes

If yes, please provide the name of regulator/exchange

Identification number issued by foreign registration body

Registered business address in country of formation

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

Please provide us with certified copies of one of the following:

☐ an ASIC or foreign regulator search

☐ an ASIC or foreign regulator certificate of registration.

### 3.2.4 Company type

Please complete the section below for public companies (3.2.4 (a)) or private companies (section 3.2.4 (b)) as applicable.

#### 3.2.4 (a) Public company

Are you a public company?

☐ No ☐ Yes

If yes, please proceed to section 3.2.5

#### 3.2.4 (b) Private company

Are you a private company?

☐ No ☐ Yes

If yes, please complete the director details section below if you are a private Australian company or a private foreign company. Do not complete for public companies.

#### Director details

How many directors are there?

Provide the full name of each director:

##### Director 1

Title

Full given names

Surname

##### Director 2

Title

Full given names

Surname

##### Director 3

Title

Full given names

Surname

##### Director 4

Title

Full given names

Surname

If there are more directors, please provide their name on a separate sheet and attach to this form.

### 3.2.5 Regulated/Listed companies

Are you an Australian listed company?

☐ No ☐ Yes – please provide name of market/exchange

Market/Exchange

Are you a majority-owned subsidiary of an Australian listed company?

☐ No ☐ Yes – please provide name of listed company and market/exchange

Company

Market/Exchange

Are you a regulated company?

One which is licensed by an Australian Commonwealth, State or Territory statutory regulator.

☐ No ☐ Yes – please provide details of the regulator and licence number

Regulator

Licence number

If you answered yes to any of these questions, please provide us with a certified copy of one of the following and sign the form at the end. For you, this form is then complete.

- ☐ an ASIC search
- ☐ a search of the licence or other records of the relevant regulator
- ☐ a public document issued by the company
- ☐ a search of the relevant market/exchange

### 3.2.6 Non-regulated/non-listed companies

If you answered no to all the questions in section 3.2.5, please fill in the sections 3.2.6 (a), (b) and (c) below.

#### 3.2.6 (a) Beneficial owner details

Provide details of all beneficial owners (i.e. company shareholders) who, through one or more shareholdings, own 25% or more of the company's issued capital.

##### Beneficial owner 1

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

DD / MM / YYYY

Usual occupation/Nature of business

##### Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Suburb

State

Postcode

Country

##### Beneficial owner 2

Title

Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)

DD

MM

YYYY

/ /

Usual occupation/Nature of business

##### Residential address

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Beneficial owner 3**

Title

Full given

names Surname/Company

name

Date of birth (DD/MM/YYYY)

 /  / 

Usual occupation/Nature of business

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit

Street number

Street name

Suburb

State

Postcode

Country

**Beneficial owner 4**

Title Full given names

Surname/Company name

Date of birth (DD/MM/YYYY)  
 /  /

Usual occupation/Nature of business

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country

**Verification procedure - beneficial owners**

Please provide a certified copy of one document from Group 1 or if you can't, a certified copy of two documents from Group 2 for each individual applicant.

**Group 1**

Provide a certified copy of one of these:

- ☐ **Australian driver's licence**  
showing your photo, and please copy the front and back
- ☐ **foreign driver's licence**  
showing your date of birth, signature and photo
- ☐ **Australian passport**  
a passport that has expired within the preceding two years is acceptable, and please copy the pages which identify you
- ☐ **foreign passport**  
showing your signature and photo, and please copy the pages which identify you
- ☐ **Australian State or Territory Government issued ID card**  
showing your date of birth, signature and photo
- ☐ **foreign Government issued ID card**  
showing your date of birth, signature and photo.

**Group 2**

If you can't provide anything from Group 1, then provide a certified copy of one of the following:

- ☐ **Australian or foreign government issued birth certificate**
- ☐ **Australian or foreign government issued citizenship certificate**
- ☐ **Centrelink pension or health card**  
please copy the front and back.

**PLUS provide a certified copy of one of the following:**

- ☐ **a Government issued notice**  
one which shows your name and residential address, not more than 12 months' old
- ☐ **a rates or utilities notice**  
one which shows your name and residential address, not more than 3 months' old
- ☐ **ATO notice**  
one which shows any debt owing to the ATO, your name and residential address, not more than 12 months old.

For each corporate beneficial owner please provide:

- ☐ a completed Identification form – Australian and Foreign companies, plus any relevant identification.

**3.2.6 (b) Voting rights**

If there are any other individuals, who have not been listed above in section 3.2.6 (a), and who are entitled, either directly or indirectly, to exercise 25% or more of the company's voting rights, please write down their full names on a piece of paper and attach to this form.

**3.2.6 (c) Senior Managing Official details**

If the company does not have any beneficial owners, please provide the details of the Senior Managing Official (or equivalent).

Title Full given names/Full company name

Surname

Date of birth (DD/MM/YYYY)  
 /  /

Nature of business

Company title

**Residential address**

A PO Box/RMB/Locked Bag is not acceptable

Property/Building name (if applicable)

Unit Street number

Street name

Suburb State

Postcode Country



## HELP

**Senior managing official:** an individual who makes, or participates in making, decisions that affect the whole, or a substantial part of the company, or that may significantly affect the company's financial standing.

## Verification procedure - senior managing official details

If you are unable to provide details of beneficial owners in 3.2.6 (a) above, please provide documentation showing the name of the senior managing official, as provided in this section 3.2.6 (c).

## 4 Signing instructions

**Individual Trustee:** where the investment has one individual trustee, the trustee must sign.

**Multiple trustees:** where the investment has more than one individual trustee, all trustees must sign.

**Corporate trustee:** where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

**Trust:** the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

**Power of Attorney:** if signing under a Power of Attorney and you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney. I/We attest that the Power of Attorney has not been rescinded or revoked and that the person who gave the Power of Attorney is still living.

Signature of trustee 1, director or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 /  / 

Company officer (please indicate company capacity)

- ☐ Director  
☐ Sole director and company secretary  
☐ Authorised signatory

Signature of trustee 2, director/company secretary or authorised signatory

Please print full name

Date (DD/MM/YYYY)

 /  / 

Company officer (please indicate company capacity)

- ☐ Director  
☐ Company secretary  
☐ Authorised signatory