Additional Card Holder Application Form



Australian Unity Banking

Please use **BLOCK** letters and a black or blue pen to complete this Application Form.

Please make sure that all questions are answered. Please indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.

Step 1 Primary cardholder details

Title	Mr Mrs Ms Miss	Date of birth DD/MM/YYYY
Surname		
Given name(s)		
Customer no.		Deposit no.
I would like to add an ad	ditional cardholder to the following credit card:	
Customer no.		
Additional Cardholder	details	
Current customer	Yes No	(to complete Tax Residency Information - Individual Form)
Name		
Title	Mr Mrs Ms Miss	Date of birth DD/MM/YYYY
Surname		
Given name(s)		
Residential address (not a PO Box)		
Street name		
Suburb		State
Postcode	Country (if not Australia)	
Phone		Mobile
Email		
Relationship to Primary cardholder	Partner X Family X Other	



Step 2 Terms and conditions

1. As primary cardholder:

- I confirm that the above credit card details belong to me.
- I wish to authorise the specified additional cardholder full access to funds within the limits the aforementioned card account.
- I accept full liability for all financial transactions carried out by the additional cardholder, who is not in any way liable for financial transactions carried out on my account.
- 2. By signing the below, each of the Primary cardholder and Additional cardholder.
- confirm that the above details are true and correct and are aware that it is an offence under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 to give false and misleading information;
- understand Australian Unity will collect personal information from me as required by the Anti-Money Laundering and Counter Terrorism Financing Act 2006, and to enable Australian Unity to operate the above account in accordance with the authorities granted by this form, and that it may take steps to verify the personal information it has collected.
- acknowledge that their personal information will be collected, used and disclosed by Australian Unity in accordance with our 'Privacy Policy' and in accordance with the law. You can obtain a copy of our Privacy Policy via our website at australianunity.com.au/privacy-policy or by phone on 1300 790 740, we're here Monday to Friday - 8.30am to 5.30pm AEST/AEDT.
- confirm that they have read and agree to Australian Unity's Credit Cards Conditions of Use

Primary cardholder signature

Additional cardholder signature

Х	Х
Name of customer	Name of joint customer
Date DD/MM/YYYY	Date DD/MM/YYYY

Office Use Only	
Date received	Loaded by.
Signature details match 🔀 Card issued 🔀	



Return by email

bankingsupport@australianunity.com.au



Post

Australian Unity GPO Box 1801, Melbourne VIC 3001 (No stamp required if mailed within Australia)



1300 790 740 australianunity.com.au

Tax Residency Information – Individual Form



Please: Use **BLOCK** letters and a black or blue pen to complete this Form.

- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.
- Your personal information will be collected, used and disclosed by us in accordance with our Privacy Policy and in accordance with the law. You can obtain a copy of our Privacy Policy via our website australianunity.com.au/privacy-policy or by telephone 1300 790 740.
- Individuals and Sole Traders to complete this form. Entities to complete the CRS Entity Declaration form available from our website.

Customer tax information (Individuals and Sole Traders only)

This section is designed to collect the tax status of an individual where this information has not previously been provided, the individual has been identified as a potential taxpayer of a country other than Australia or to provide updated information about tax residency for an individual. Complete one form for each individual.

PLEASE NOTE: You may be treated as being a non-Australian taxpayer if the requested information is not provided.

Customer

Step 1.1 Personal details

Title	X	Mrs	Ms	Miss		Date of birth DD/MM/YYYY
Surname						
Given name(s)						
Occupation						
Email						
Home phone						
Work phone					Мо	bile

Step 1.2 Residential address (PO Box is NOT acceptable)

Unit]		Street number	
Street name				
Suburb		Sta	ate	
Postcode	Country (if not Australia)			

Step 1.3 Mailing address (if different from residential address)

Unit		Street number		
Street name				
Suburb		State		
Postcode	Country (if not Australia)			



Step 1.4 Tax status

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

If you have any questions on how to define your tax residency status, please visit the OECD website (<u>oecd.org</u>) or speak to a professional tax adviser as we are not allowed to give tax advice.

Answer **both** tax residency questions:

Are you a tax resident of Australia?	Yes	No
Are you a tax resident of another Country?	Yes	No

If you are a tax resident of a country other than Australia, provide your Tax Identification Number (TIN) or equivalent below. If you are a tax resident of more than one country, list all relevant countries below.

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	

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

Reason B You have not been issued with a TIN.

Please explain why.

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

lf	you are a tax resident of more countries,	please cross this box	re-print this pac	ge and provide the	additional detai	ils

Step 1.5 Declaration and signature

By completing and signing this declaration I certify that:

- The information I have provided is true and correct.
- I have provided my tax residency status, including all countries which I am a tax resident and the respective TIN.

- I will inform you within 30 days of any change in circumstances which affect my tax residency status.
- I consent to the collection, use, storage and disclosure of my personal information in this form. Any personal information collected for the purposes of the Foreign Account Tax Compliance Act (FATCA) and the OECD Common Reporting Standard (CRS) will be:
 - Used for the purpose of meeting obligations under CRS and the Intergovernmental Agreement (IGA) between Australia and United States implementing the United States legislation known as FATCA; and
 - Used for other purposes relating to verification of our identity and to review and correct discrepancies in the information provided and recorded.
- I confirm that I have read Australian Unity's privacy policy and understand the terms and conditions surrounding the collection, use, storage and disclosure of my personal information.
- (if signing under a power of attorney) I declare that I have not received notice of revocation of that power.

Signature of Customer



Print name of Customer



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Return by post Australian Unity GPO Box 1801, Melbourne VIC 3001





1300 790 740 australianunity.com.au