

# Investor Identification Form

## Partnerships



### Australian Unity Investment Bonds

The information requested below is required under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML). The information collected will be used to verify your personal details. In accordance with the Anti-Money Laundering laws, if you do not provide the information or if we require additional information to be collected we will contact you for further information and we will:

- Delay the start of your investment/withdrawal of funds until we are satisfied with the information received, or
- Refund your contribution or refuse to withdraw funds from your investment.

**One form is to be completed by each investor or by an adviser on the investor's behalf.**

Please phone the Investor Services Team on **1300 1300 38** if you have any questions.

Please **PRINT** clearly in **BLACK** or **BLUE** pen keeping well within the boxes. Use crosses in the boxes marked with an "X".

#### 1A. Partnership Information

Partnership name	<input type="text"/>
Full business name (as registered under law)	<input type="text"/>
ABN (if any)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Country where partnership established	<input type="text"/>

#### 1B: Type of partnership

Is your partnership regulated by a professional association?

Yes Association name

If you answered "Yes" to the above question please proceed to step 2.

No How many partners are there?  Please provide full name and address of each partner below.

#### 1C: Partnership Details (Only complete if partnership is not regulated by a professional association)

##### Partner 1

Title	<input checked="" type="checkbox"/> Mr <input checked="" type="checkbox"/> Mrs <input checked="" type="checkbox"/> Ms <input checked="" type="checkbox"/> Miss	Other (please specify) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Surname	<input type="text"/>	
Given name(s)	<input type="text"/>	
Residential address (not a PO Box)	<input type="text"/>	
Suburb	<input type="text"/>	State <input type="text"/> <input type="text"/> <input type="text"/>
Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Country <input type="text"/>
Email	<input type="text"/>	

If your country of incorporation or creations is outside of Australia, please complete the 'Beneficial Owner Information Form' on our website, [australianunity.com.au/wealth](http://australianunity.com.au/wealth)

Are you a US Citizen or US tax resident?  Yes  No

If 'Yes', please provide your Taxpayer Identification Number ('TIN'):

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth:

Gainful employment       Inheritance/gift       Financial investments

Business activity       Superannuation savings       Other – please specify:

**Partner 2**

Title  Mr  Mrs  Ms  Miss      Other (please specify)

Surname

Given name(s)

Residential address (not a PO Box)

Suburb  State

Postcode  Country

Email

If your country of incorporation or creations is outside of Australia, please complete the 'Beneficial Owner Information Form' on our website, [lifeplan.com.au](http://lifeplan.com.au)

Are you a US Citizen or US tax resident?  Yes  No

If 'Yes', please provide your Taxpayer Identification Number ('TIN'):

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth:

Gainful employment       Inheritance/gift       Financial investments

Business activity       Superannuation savings       Other – please specify:

If there are more partners, please provide details on a separate sheet.

**1D: Individual identification procedures (for one of the partners we need to collect and verify the KYC information that is required for an individual)**

- Verify the individual's full name; and **EITHER** their date of birth or residential address.
- Complete **EITHER** Part **A** or Part **B**. (Note: Part **B** should only be completed if the individual does not own a document from Part **A**.)
- If the individual is unable to provide the required documents contact our Investor Services Team on 1300 1300 38.
- Documents that are written in a language that is not English, must be accompanied by an English translation prepared by an accredited translator.
- Each page of a copied document must be certified as a true copy (Refer to page 3 for details).

**Part A: Initial ID Requirements** (Document must show photo and signature of the person)

Select only one option from this section, go to step 2 once completed.

Australian State/Territory or foreign current driver's licence showing a photograph.

- Australian passport (must not have expired more than 2 years previously).
- Card issued under a State or Territory for the purpose of proving a person's age, card must also show a photograph.
- Foreign passport or similar travel document showing a photograph and containing a signature.
- National identity card issued by a foreign government showing a photograph of the person in whose name the card is held.

## Part B: Additional ID Requirements (Two documents required, one from each section)

Select one option from this section.

- Australian or foreign birth certificate/extract       Australian or foreign citizenship certificate
- Pension card issued by Centrelink       Health card issued by Centrelink

**AND one 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 and which contains a name and residential address.
- A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable to or from the Commonwealth and which contains a name and residential address.
- A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services and contains a valid name and residential address.
- If under the age of 18, a notice that:
- Was issued by a school principal within the preceding 3 months; and
  - Contains a valid name and residential address; and
  - Records the period of time that the person attended the school; or
  - A Medicare card if the child does not attend school.

## 2. Partnership Identification Procedures

### Part A: Acceptable ID Documents (to verify partnership name)

Select one of the following options used to verify the partnership.

- An original, a certified copy or certified extract of the partnership agreement.
- A certified copy or a certified extract of minutes of a partnership meeting.
- A search of the relevant ASIC or other regulator's database.
- A notice issued by the Australian Taxation Office within the last 12 months (eg. Notice of Assessment). Block out the TFN before scanning, copying or storing this document.
- An original or certified copy of a certificate of registration of business name issued by a government or government agency in Australia.

### Part B: Acceptable ID Documents (to verify membership of a professional association)

Select one of the following options used to verify the partnership.

- An original current membership certificate (or equivalent).
- Membership details independently sourced from the relevant association.
- A Disclosure Certificate. Please contact our Investor Services Team on 1300 1300 38 for details.

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

## 3. Partnership Declaration

I/We have no reason to suspect that the contribution lodged with the application or any subsequent contributions is or will be derived from or related to any money laundering, terrorism financing or other illegal activities.

I confirm that an Investor Identification for Individuals and Sole Traders form has also been completed for each partner listed.

A certified copy of each document is to be attached to this completed form (do not send originals). Each page of a copy must be certified as a true copy. Please sign here confirming that all information being forwarded is correct.

I/We declare that the information provided for meeting FATCA requirements (where applicable) is true and correct and that I/we will provide all necessary co-operation and assistance in order for us to comply with obligations under Australian legislation designed to give effect to the FATCA agreement between Australia and the United States.

**Signature**

Date

/   /

**Persons who may certify documents**

A certified copy means a document that has been certified as a true copy of an original document by one of the following persons:

- 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).
- A judge of a court or a magistrate.
- A chief executive officer of a Commonwealth court.
- A registrar or deputy registrar of a court.
- A Justice of the Peace.
- A notary public (for the purposes of the Statutory Declaration Regulations 1993).
- A police officer.
- An agent 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.
- An officer with 2 or more continuous years of service with one or more financial institution (for the purposes of the Statutory Declaration Regulations 1993).
- An officer with, or authorised representative of, a holder of an Australian financial services license, having 2 or more continuous years of service with one or more licensees.
- 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.

**The certifier must:**

**Write the following wording, or similar, on the copy of your documents:**

Example, for identity verification documents that contain a photograph of you “I certify that I have seen the original documentation and that the photograph is a true likeness and this copy is a complete and accurate copy of that original.”

Example, for other identity verification documents “I certify that I have seen the original documentation and this copy is a complete and accurate copy of that original.”

**Sign and date each page of the photocopy.**

**Add their name in block capitals along with their position/ capacity, address and daytime contact telephone number (not a mobile phone). The certifier may be contacted by us.**

**Add the official stamp of their office, if possible.**

**OFFICE USE ONLY**

**Document Details**

Original Viewed  Certified Copy Viewed  Attached  Not Attached  Performed Search

**Information**

AFSL Number

**Document 1**

**Document 2 (if required)**

Document Issuer



Issued/Search Date



Expiry Date



Document Number



English Translation Required

Sighted  Yes  No

Sighted  Yes  No

Signed by

Date



### Return by post

(together with any identification documents where relevant)

**Australian Unity, Reply Paid 89, Adelaide SA 5001**

(no stamp required if mailed in Australia)

If posting from outside of Australia, please send to:

**Head Office: 114 Albert Road, South Melbourne VIC 3205**



### Fax

1800 804 890

#### Contact us



Australian Unity  
114 Albert Road, South Melbourne VIC 3205



[australianunity.com.au/wealth](https://australianunity.com.au/wealth)

#### Investor Services



[enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)



1300 1300 38



1800 804 890

#### Adviser Services



[investmentbonds@australianunity.com.au](mailto:investmentbonds@australianunity.com.au)



1300 133 285



1800 804 890