

Customer verification form – Individuals.

All fields are mandatory, unless specified otherwise.

Information	on collected from customer.				
Bank of Melb	ourne Customer Access Number				
Title	Full name (given name/s and fo	ımily name)		Date of birth	
				/ /	
Are you know	n by any other name(s)?				
Yes	No other names				
Please specif	y all names				
Residential a	ddress (Not a PO Box)				
Email address		Mobile n	number		
Are you a tax	resident of any country outside of Au	stralia?			
Yes >					
	*A Foreign TIN is an identifying number or ed	uivalent issued by your country of tax	residency that is used for tax purposes.		
	If you're a tax resident in a jurisdiction that doesn't issue a TIN or equivalent, you'll need to provide evidence (which could include publicly available information) from an official authority written in English.				
	Country 1	F	Foreign TIN 1		
	Country 2	F	Foreign TIN 2		
	Country 3	F	Foreign TIN 3		

Information collected from custo	omer (continued).	
mployment Type (Please select the em	aployment type that reflects your current situa	ation best)
Casual Dependent Contractor Full-Time Independent Contractor Occupation	Social Security Resident Temporary Other Part-Time	Retired Self-Employed Student Unemployed
he following section to be complete	ed by Customers only (Not Customer Asso	ciates).
Purpose of business relationship (p		·
	engaging with us to obtain products and servi	ices. Customers may have multiple reasons for
Transactional	Wealth	Correspondent banking
Savings	Short-term borrowing	Financial markets
Protection Source of funds (please select one	Long-term borrowing	
Note: This refers to the origin of the f	· · · · ·	tionship between you and us. Please note that funds.
Salary/Wages	☐ Inheritance	Compensation payment
Commission	Redundancy	Gift/Donation
Bonus	Liquidation of assets	Windfall
Loan	Government Benefits	Tax Refund
Business Profits	Superannuation/pension	☐ Insurance payment
Sale of assets	Investment income/earnings	
Rental Income	Business income/earnings	
Additional sources (please specific		
Source of wealth (please select on	e or more options)	
Note: This refers to the origin of your wealth. Please indicate all your source		that many customers will have multiple sources of
Government Benefits	Windfall	Business income/earnings
Business Profits	Inheritance	Compensation payment
Rental Income	Liquidation of assets	Gift/Donation
	Employment income/earnings	Owns real estate/property
Redundancy	Litiployitient income/eartiings	— Owns real estate/property
Redundancy Insurance payment	Superannuation/pension	None

Information collected from customer (continued).
Are you a Sole Trader?
Yes Full Business/Trading Name
□ No
ABN (if any)
□ No ABN
Full address of the principal place of business (not a PO Box) (if any)
Business Classification (ANZSIC)

Documents to be attached with this form.

Please attach certified copies of acceptable identification documents that verify details of the individual to be identified (Individual Customers and Sole Traders).

This form and any attached documents are a record of the identification procedure for this customer, and the information obtained in the course of carrying out the procedure.

Foreign Tax Residency.

We are required to identify tax residents of a country (ies) other than Australia in order to meet account information reporting requirements under local and international laws.

If at any time after account opening, information in our possession suggests that you, the entity and/or any individual who holds ownership and/or control in the entity of 25% or more (Beneficial Owner/Controlling Person) may be a tax resident of a country(ies) other than Australia, you may be contacted to provide further information on your foreign tax status and/or the foreign tax status of the entity and/or any Beneficial Owners/Controlling Persons. Failure to respond may lead to certain reporting requirements applying to the account.

You certify that if at any time there is a change to the foreign tax status details for you, the entity and/or any controlling persons, you will inform the bank. You also certify that if at any time there is a change of a controlling person/s in your entity, you will inform the bank.

A Beneficial Owner/Controlling Person refers to the individual(s) that directly or indirectly owns a legal interest in the entity of 25% or more and/or exercises actual effective control over the entity, whether from an economic or other perspective such as through voting rights. In addition, in the case of a trust, a Beneficial Owner/Controlling Person includes the settlor(s), trustee(s), appointer(s), protector(s), beneficiary(ies) or classes of beneficiaries and in the case of an entity other than a trust, the term includes persons in equivalent or similar positions.

Privacy Statement and Consent Request.

Privacy Statement.

All personal information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at bankofmelbourne.com.au/privacy/privacy-statement/ or by calling us on 13 22 66. Our Privacy Statement also provides information about how you can access and correct your personal information and make a complaint. You do not have to provide us with any personal information, but, if you don't, we may not be able to continue to provide products or services to the customer for which you are a trustee, partner, representative, beneficial owner, or controlling person.

Consent request.

You consent to Bank of Melbourne collecting and holding any sensitive information (such as health information or information about your racial or ethnic origin) which appears on certified copies of your identity documents. You will not be able to withdraw your consent to Bank of Melbourne holding this information after it has been provided because Bank of Melbourne is required to retain copies of identification documents under the *Anti-Money Laundering and Counter-Terrorism Financing Act* 2006.

If you do not consent to Bank of Melbourne's collection of any such sensitive information, you may verify your identity in person at any Bank of Melbourne branch.

Customer	Dec	lara	tio	n.

I declare that to the best of my knowledge the information I have provided above is true and correct as at the date of this document. I understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

Where I am providing personal information about another individual, I have made them aware:

- that I will be doing this; and
- that Bank of Melbourne will collect, use, and share their personal information in accordance with its Privacy Statement available at bankofmelbourne.com.au/privacy/privacy-statement

Where I am providing Bank of Melbourne with another person's sensitive information, I have obtained their consent to sharing it with Bank of Melbourne and their consent to Bank of Melbourne collecting, using and disclosing their sensitive information in accordance with Bank of Melbourne's Privacy Statement.

C	The second second
Customer	SIGNATI IFA

X	
Print full name	Bank of Melbourne customer number (if applicable)
Position held	Date of signature / /

Next steps.

- Step 1: Ensure all relevant sections of the form are completed and the customer declaration is signed
- **Step 2:** Attach all supporting documents
- **Step 3**: Return the completed form by post to:

Business Identification Team

Reply Paid 91348

SYDNEY NSW 2001

If you are located outside of Australia please pay for postage and send to:

Business Identification Team

GPO Box 1806

Sydney NSW 2001

Australia

Bank use only.

Please contact the Business Identification Team on 1800 100 238 between 9am - 5pm AEST Mon - Fri.

The team will be able to assist customers with completing the form. Kindly check all sections of the form are completed and signed. Please check all required documents are certified correctly. The completed form and certified identification will need to be forwarded to businessIDBOM@bankofmelbourne.com.au after completing the Employee Declaration.

Employee Declaration.

I have followed the process for identification and verification as required by policy and procedure and have verified the required information provided by the customer using approved verification source(s). Where the verification source has been provided by the customer the document is to the best of my knowledge a certified copy.

Employee name (print)	Employee salary number
Employee signature	Date
X	/ /