

Dealer registration – AFSL

Use this form to register a financial services company that holds an Australian Financial Services Licence (AFSL) number with Macquarie to distribute Macquarie Products or Services.

In addition to this form, to access Macquarie Online services, you, any financial services professionals and employees will be required to complete the *Adviser registration form* or the *Support staff registration form*.

1. Dealer information

 All fields marked with a red asterisk (*) are mandatory.

Dealer/Company name:

Dealer code (if known):

Type of company

Self-Licensed Firm

Dealer Group Licensed Firm

Stockbroking Firm

*Australian Business Number (ABN):

*ACN:

Name of ABN holder (if different from company name):

Does your company hold an Australian Financial Services Licence (AFSL) number?

No, please use the *Macquarie Dealer Registration – Non AFSL* form

Yes, *AFSL number:

AFSL name (if different):

 If the business name is different to the name of the AFSL holder, please provide documentation demonstrating the business relationship.

*A. Company contact information

Please tick if the dealer already exists on file

If the dealer is existing on file, please update the contact information for the company below.

Registered address (cannot be a PO Box):

Suburb:

State:

Postcode:

Country:

AUSTRALIA

1. Dealer information (Continued)

Postal address (if different from office address):

Suburb:

State:

Postcode:

Country:

AUSTRALIA

Office phone number:

Office email address:

Principal Place of business:

Suburb:

State:

Postcode:

Country:

AUSTRALIA

*B. Company contact information

Name of contact person:

Mobile number:

Email address:

2. Company bank details

This section is only applicable if you hold an AFSL or are eligible to receive payments.

Macquarie will make any applicable payments to the account listed here. Please read the terms and conditions relating to fees and other payments at the end of this form. Bank details must be in the same name as the AFSL holder. If not, please provide documentation to confirm the relationship between the two entities.

Account name:

BSB:

Account number:

□	□	□	□	-	□	□	□	□
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3. Company GST information

This section is only applicable if you hold an AFSL or are eligible to receive payments.

We require your GST information for purposes of adviser service fees or other payments.

Is the Company registered for GST?

Yes

No

Is the Company a resident of Australia for income tax purposes?

Yes

No, please provide country of residence for income tax purposes:

5. Dealer level access (Continued)

Street name and number:

Suburb:

State:

Postcode:

*Electronic Verification		
I have attached a certified copy of my government identification		
No ► <i>please complete the below</i> Yes ► <i>go to section 6</i>		
Government Identification Details (This is for verification purposes only)		
ID type (Drivers Licence, Passport, Proof of Age)	Licence/Document number	State of Issue (if using a passport, input Country of Issue)
Drivers licence card number (Only if present on ID):		
Residential address - Street number and name:		
Suburb:	State:	Postcode:

Representative Signature 1:

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Date:

Representative 2

Please select your role:

- Financial Adviser (Individual) ► *please confirm if an adviser code is needed:* Yes No
- Support Staff
- Other Financial Services Professional

Title:

Name:

Any other name known by:

Macquarie ID (if known):

*Date of birth:

*Mobile number:

*Email address:

5. Dealer level access (Continued)

Is your postal address the same as stated in section 1A?

Yes No, please provide your postal address

Street name and number:

Suburb:

State:

Postcode:

*Electronic Verification

I have attached a certified copy of my government identification

No ► *please complete the below* Yes ► *go to section 6*

Government Identification Details (This is for verification purposes only)

ID type

(Drivers Licence, Passport, Proof of Age)

Licence/Document number

State of Issue

(if using a passport, input Country of Issue)

Drivers licence card number (Only if present on ID):

Residential address - Street number and name:

Suburb:

State:

Postcode:

Representative Signature 2:

Date:

 **Macquarie ID is a unique code allocated to you. Please do not share this with others. If you do not have a Dealer code or Macquarie ID we will automatically issue you one and email it to the email address listed in this section.**

6. Declaration and signature (Continued)

Title: _____ Name: _____

Any other name known by: _____

Corporate title:

Director

Secretary

Director Identification Number (DIN): _____

Electronic Verification - I have attached a certified copy of my government identification

No ► ***please complete the below***

Yes ► ***below not required***

Date of birth: _____

Government Identification Details (This is for verification purposes only)

ID type

(Drivers Licence, Passport, Proof of Age)

Licence/Document number

State of Issue

(if using a passport, input Country of Issue)

Drivers licence card number (Only if present on ID): _____

Residential address - Street number and name: _____

Suburb: _____

State: _____

Postcode: _____

Signature 2:

Date: _____

Sign

Wet signature, or

Electronic signature from an approved provider.

Visit Adviser Help Centre to view our requirements.

Submit



Email to adviser@macquarie.com

Need Help?

For more information, please visit **Adviser Help Centre**.