

## Business Saving Account Individual/Sole Trader ID form

Macquarie Bank Limited ABN 46 008 583 542 AFSL and Australian Credit Licence no. 237502

- This form should be used to add a director to an existing BSA or by Sole Traders as directed by Macquarie
- Once completed, please email your scanned form and identification documents to digitalbusiness@macquarie.com.
- Please use **black ink**. Print in **CAPITALS**. Mark boxes with an  $[\mathbf{X}]$  where applicable.



#### Individual identification procedure

1.1	Personal details					
	Title:	Full Given name(s):				
	Surname:					
	Other names known by:					
	Date of birth:	/ / Occupation:				
	Residential address (PO Box is NOT acceptable)					
	Street name and number:					
	Suburb/town:	State: Postcode:				
	Country:					
	Email address:					
	Mobile phone number:					
	How have you mainly accumulated your wealth? <i>(only select one)</i>					
	Business operations	Investments Inheritance/gift				
	Sales of a property or	asset Legal settlement Foreign income				
	Are you requesting signa	tory access on an existing account?				
	Yes ► go to section 1.	.2				
	No ► if you're a sole t	trader, go to section 1.3				
1.2	Account Details					
	Please provide the details of your account you are requesting access to.					
	Account name:					
	Account number:					
	BSB:					
	Go to section 2					

#### Individual identification procedure (continued)

L.3 Sole Trader details								
Full Business name:								
ABN:								
	Principal place of business (if any) (PO Box is NOT acceptable)							
Street name and number:								
Suburb/town:			State:		Postcode:			
Country:								
Business activity:								
Employment/Business in Savings What will this account main	What will this account mainly be used for? <i>(only select one)</i>							
x Residency rules differ by cour ne a person spends in a country n be a result of citizenship or re ease answer <b>both</b> tax residency	y or the location of a pesidency.							
re you an Australian resident fo	or tax purposes?	Yes No						
No Yes ► Please list all rele	evant countries below a				ber (TIN) or equivalent.			
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### Identification documents

Please attach a certified copy of the ID documentation (and any required translation), to satisfy either part I, II or III, as outlined below. If the individual does not own a document from Part I, then complete either Part II or III.

Please note identification documents must have been certified within the last 2 years, at the time of acceptance by us.

Acceptable ID documents – attach a legible certified copy of the ID documentation (and any required translation). Identification documents must have been certified within the last 2 years, at the time of acceptance by us.

<ul> <li>Part I – acceptable primary photographic</li> </ul>	Select ONE valid option from this section only (all documents must contain a photograph of the person:				
ID documents	Australian State/Territory driver's licence				
	Australian passport (a passport that has expired within the preceding 2 years is acceptable)				
	Card issued under a State or Territory for the purpose of proving a person's age				
	Foreign passport or similar travel documents also containing the signature of the person				
• Part II - acceptable	SHOULD ONLY BE COMPLETED IF YOU DO NOT OWN A DOCUMENT FROM PART I				
secondary ID documents	Select ONE valid option from this list:				
	Birth certificate or birth extract issued by an Australian State or Territory				
	Australian citizenship certificate				
	Health Care Card issued by Services Australia				
	<u>AND</u> ONE valid option from this section (all documents must contain the person's name and residential address):				
	A document issued by the Commonwealth or State or Territory within the preceding 12 months that records the provision of financial benefits to the person				
	A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the person to the Commonwealth (or by the Commonwealth to the person)				
	A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person				
• Part III - acceptable	SHOULD ONLY BE COMPLETED IF YOU DO NOT OWN A DOCUMENT FROM PART I				
foreign photographic ID documents	Select ONE valid option from this section only (all documents must contain a photograph of the person):				
	Foreign driver's licence that also contains the person's date of birth				
	National ID card issued by a foreign government that also contains a signature of the person				

#### Certification of identification documents

Copies of the required identification must be certified and confirmed on the document as a true copy of an original document by one of the following persons:

- 1. 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)
- 2. a judge of a court
- 3. a magistrate
- 4. a chief executive officer of a Commonwealth court
- 5. a registrar or deputy registrar of a court
- 6. a Justice of the Peace
- 7. a notary public (for the purposes of the Statutory Declaration Regulations 1993)
- 8. a police officer
- 9. an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public

- a permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public
- 11. an Australian consular officer or an Australian diplomatic officer (within the meaning of the *Consular Fees Act* 1955)
- an officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)
- a finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993)
- 14. an officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one or more licensees, or
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership.

#### Declaration and signature by individual

By signing below, I:

- agree that, to the best of my knowledge, all information given in this form (including any attached documents) is true and correct and that I will promptly notify Macquarie and provide any changes to the information provided by me
- acknowledge that I have read, understood and accept the following documents (available at our website **macquarie.com.au** or by calling 1800 620 673):
  - Macquarie Business Savings Account terms and conditions
  - Macquarie Business Savings Account fees, limits and lodgement times, and
  - Macquarie Electronic Banking terms and conditions
- agree to the Privacy Statement (link below and found within the Macquarie Business Savings Account terms and conditions) which
  describes the handling of my personal information, including direct marketing and I understand that I can change my marketing
  preferences by visiting macquarie.com.au/optout-bfs or calling 1800 620 673,
- agree for my identity to be verified electronically using government sources and information held by credit reporting agencies such as Equifax. For more information, refer to Macquarie Client Identity Verification FAQs
- agree to provide Macquarie with any information that is reasonably required in order for Macquarie to meet its obligations under AML/CTF laws, FATCA and/or its internal policies and procedures.

Link to Privacy Statement: macquarie.com.au/assets/bfs/documents/personal-direct/macquarie-privacy-statement.pdf

# Signature Date: / / Full name: